


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90147 047 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000058054			
1. Corporation Name PBF LAND COMPANY			
Principal Place of Business 2090 PALM BEACH LAKES BLVD., STE. 800 WEST PALM BEACH FL 33409		Mailing Address 2090 PALM BEACH LAKES BLVD., STE. 800 WEST PALM BEACH FL 33409	
2. Principal Place of Business 21 580 Village Blvd. Suite 160 West Palm Beach, FL 33409		2a. Mailing Address 26 580 Village Blvd. Suite 160 West Palm Beach, FL 33409	
22 Zip Country 23 24 25		27 28 29 30 Zip Country	
9. Name and Address of Current Registered Agent CHILLINGWORTH, CHARLES C 2090 PALM BEACH LAKES BLVD., STE. 800 WEST PALM BEACH FL 33409		10. Name and Address of New Registered Agent 81 Name 82 Jeanne Odom Conway, Esq. (at Acceptable) 83 580 Village Blvd., Suite 160 West Palm Beach, FL 33409 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE: <i>James C. Conway</i> (NOTE: Registered Agent signature required when reinstating) DATE: 4/29/99			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DPT NAME CHILLINGWORTH, CHARLES C STREET ADDRESS 2090 PALM BEACH LAKES BLVD., STE. 800 CITY-ST-ZIP WEST PALM BEACH FL 33409		1.1 TITLE 1.2 NAME Charles C. Chillingworth 1.3 STREET ADDRESS 257 Granada Road 1.4 CITY-ST-ZIP West Palm Beach, FL 33409	
TITLE S NAME FEKETE, HELEN K STREET ADDRESS 2090 PALM BEACH LAKES BLVD., STE. 800 CITY-ST-ZIP WEST PALM BEACH FL 33409		2.1 TITLE 2.2 NAME 580 Village Blvd. 2.3 STREET ADDRESS Suite 160 2.4 CITY-ST-ZIP West Palm Beach, FL 33409	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/10/1996	
4. FEI Number 65-0688582	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)