

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000067196

**Entity Name:** FLORIDA LAND & RANCHES, INC.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9987 PRESERVES WAY  
JACKSONVILLE, FL 32219 US

**New Principal Place of Business:**

**Current Mailing Address:**

325 CORPORATE DR STE 100  
PORTSMOUTH, NH 03801

**New Mailing Address:**

**FEI Number:** 59-3397272

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLAYTON, JOSEPH T JR  
9987 PRESERVES WAY  
JACKSONVILLE, FL 32219 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CLAYTON, JOSEPH T JR  
Address: 9987 PRESERVES WAY  
City-St-Zip: JACKSONVILLE, FL 32219

Title: TD  
Name: MACALPINE, WILLIAM A  
Address: 325 CORPORATE DR #100  
City-St-Zip: PORTSMOUTH, NH 03801

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM A MACALPINE

TD

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date