2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000091070

1. Entity Name

TREWAY LAND CORPORATION



Principal Place of Business

Mailing Address

450 EAST LAS OLAS BLVD. **SUITE 1500** FT. LAUDERDALE, FL 33301

450 EAST LAS OLAS BLVD. **SUITE 1500** FT. LAUDERDALE, FL 33301

FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90230 025 ***150.00

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01102007	No Chg-P	CR2E034 (11/05)	

Applied For 4. FEI Number 65-0736639 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

HUIZENGA, H. WAYNE JR 450 EAST LAS OLAS BLVD #1500 FT. LAUDERDALE, FL 33301

changed, or on an attachment with an

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent							
SIGNATURE Signature, typed or printed name of registered agent and little ill applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HUIZENGA, H. WAYNE JR. 450 EAST LAS OLAS BLVD., 15 FLOO FT. LAUDERDALE, FL 33301	DR					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV F BRANDEN, CRIS V 450 EAST LAS OLAS BLVD., 15 FLOOFT. LAUDERDALE, FL 33301	DR					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trusted employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							

Cris V. Branden

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR