

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000092716

FILED
Apr 25, 2007
Secretary of State

Entity Name: MOUNTAIN CREEK LAND COMPANY

Current Principal Place of Business:

11514 EAST HWY. 316
FT MCCOY, FL 32134

New Principal Place of Business:

233 SW 3RD STREET
OCALA, FL 34474

Current Mailing Address:

P O BOX 188
FT MCCOY, FL 32134

New Mailing Address:

P O BOX 1956
OCALA, FL 34478

FEI Number: 59-3407361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, C. RAY III
11514 EAST HWY. 316
FT MCCOY, FL 32134 US

Name and Address of New Registered Agent:

GREENE, C. RAY III
233 SW 3RD STREET
OCALA, FL 34474 US

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:

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: SEYLER, EDWARD K
Address: 707 NE 25TH AVE
City-St-Zip: Ocala, FL 34470

Title: D () Delete
Name: HARDIN, BOBBY G
Address: 707 NE 25TH AVE
City-St-Zip: Ocala, FL 34470

Title: DST () Delete
Name: GREENE, C. RAY III
Address: P O BOX 188
City-St-Zip: FT MCCOY, FL 32134

Title: D () Delete
Name: GREENE, WM BEDFORD SR
Address: P O BOX 188 N/A
City-St-Zip: FT MCCOY, FL 32134

Title: DP () Delete
Name: GREENE, JACK A
Address: 11514 E HWY 316
City-St-Zip: FORT MC COY, FL 32134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: GREENE, C. RAY III
Address: P O BOX 1956
City-St-Zip: Ocala, FL 34478

Title: D (X) Change () Addition
Name: GREENE, WM BEDFORD SR
Address: P O BOX 1956
City-St-Zip: Ocala, FL 34478

Title: DP (X) Change () Addition
Name: GREENE, JACK A
Address: P O BOX 1956
City-St-Zip: Ocala, FL 34478

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: C. RAY GREENE, III

DST

04/25/2007

Electronic Signature of Signing Officer or Director

Date