

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90258 006 ***150.00

0476061

DOCUMENT # **P97000005834**

1. Entity Name
AMERICA LAND COMPANY

Principal Place of Business
129 1/2 N. WOODWARD AVE.
DELAND FL 32720

Mailing Address
129 1/2 N. WOODWARD AVE.
DELAND FL 32720



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
625 MACY AVENUE
 Suite, Apt. #, etc.

3. Mailing Address
625 MACY AVENUE
 Suite, Apt. #, etc.

City & State
LAKE HELEN FL
 Zip
32744-3417
 Country
Volusia

City & State
LAKE HELEN FL
 Zip
32744-3417
 Country
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4. FEI Number **59-3611631**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FEATHER, ROBERT G
129 1/2 N. WOODWARD AVE.
DELAND FL 32720
625 MACY AVENUE
LAKE HELEN FL
32744-3417

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City Zip Code

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.

SIGNATURE **4/19/01**
Signature typed or printed (handwritten, stored agent, and file) is applicable. (NOTE: For stored Agent's signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2001 Fee will be \$850.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	Y	☐ Delete			☐ Change ☐ Addition		
	FEATHER, ROBERT G	129 1/2 N. WOODWARD AVE.	DELAND FL 32720				
	PS	☐ Delete			☐ Change ☐ Addition		
	FEATHER, ROBERT G	129 1/2 N. WOODWARD AVE.	DELAND FL 32720-3952				
		☐ Delete			☐ Change ☐ Addition		
		☐ Delete			☐ Change ☐ Addition		
		☐ Delete			☐ Change ☐ Addition		
		☐ Delete			☐ Change ☐ Addition		
		☐ Delete			☐ Change ☐ Addition		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: **Robert G. Feather** **4/19/01** **386-228-2825**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)