FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 31, 2003 8:00 am **Secretary of State** P97000025805 DOCUMENT # 01-31-2003 90388 022 ***150.00 1. Entity Name TATUM LAND & DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 22000079 P.O. DRAWER A RTE. 1. BOX 208 LAWTEY FL 32058 LAWTEY FL 32058 2. Principal Place of Business 2001 Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-3433998 -awte Not Applicable \$8.75 Additional Country Country Zip <u>3</u>ã058 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WALKER, JAMES V Street Address (P.O. Box Number is Not Acceptable) 10151 DEERWOOD PARK BLVD., BLDG. 100, STE. 200 JACKSONVILLE FL 32256 City 109/ 8. The above named entity specifies 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 agen SIGNATURE OTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 40. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition TATUM, CHARLES W NAME NAME P.O. DRAWER A STREET ADDRESS STREET ADDRESS LAWTEY FL 32058 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition TATUM, THOMAS W JR. NAME NAME STREET ADDRESS P.O. DRAWER A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAWTEY FL 32058 TITLE Delete --TITLE Change 🗔 ہے Addition TATUM. SYLVIA J NAME NAME STREET ADDRESS STREET ADDRESS P.O. DRAWER A CITY-ST-ZIP CITY-ST-ZIP LAWTEY FL 32058 ☐ Delete TITLE Change Addition TITLE TATUM, LINDA S NAME NAME STREET ADDRESS P.O. DRAWER A STREET ADDRESS CITY-ST-ZIP LAWTEY FL 32058 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition

12. 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 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 10 or Block 11 if

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP