2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P97000036822

FILED Apr 05, 2007 08:00 All Secretary of State

Principal Place of Business 8245 RIVER COUNTRY DRIVE SPRING HILL, FL 34607

SLS LAND, INC.

Mailing Address

8245 RIVER COUNTRY DRIVE SPRING HILL, FL 34607



02052007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3441457 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GLOVER, STUART R 8245 RIVER COUNTRY DRIVE SPRING HILL, FL 34607

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

U00000691643

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

04/13/07-80019-002 iso.op

OFFICERS AND DIRECTORS 10. TITLE GLOVER, STUART R NAME STREET ADDRESS 8245 RIVER COUNTRY DRIVE CITY-ST-7IP SPRING HILL, FL 34607 CHAMPION, SANDRA L NAME STREET ADDRESS 8245 RIVER COUNTRY DRIVE CITY-ST-ZIP SPRING HILL, FL 34607 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby 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 eath; 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daylime Phone #