2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 12, 2005 08:00 AM Secretary of State

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DOCUMENT # P97000037094 1. Entity Name J & L LAND COMPANY, INC.		
Principal Place of Business 4019 89TH STREET EAST PALMETTO, FL 34221	Mailing Address 4019 89TH STREET EAST PALMETTO, FL 34221	

01272005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0777623 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILLIS, JAMES H DO NOT WRITE 4019 89TH STREET EAST PALMETTO, FL 34221 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 000000260804 10. 03/12/05-80038-024 150.00 TITLE NAME WILLIS, JAMES H STREET ADDRESS 4019 89TH STREET EAST CITY-ST-ZIP PALMETTO, FL 34221 TITLE WILLIS, LINDA A NAME STREET ADDRESS 4019 89TH STREET EAST CITY-ST-ZIP PALMETTO, FL 34221 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 changed, or on an attaching it with an address, with all other like empowered.

SIGNATURE: A

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-9-05

941-722-0478

Daytime Phone