## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P97000043582

1. Entity Name
GREAT SOUTHERN LAND CORPORATION



Jul 14, 2008 08:00 AM Secretary of State

Principal Place of Business

103 LAUREL TREE WAY BRANDON, FL 33511 Mailing Address

103 LAUREL TREE WAY BRANDON, FL 33511



07112008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3450286

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

813-267-9567

6. Name and Address of Current Registered Agent

JOHNSON, SCOTT G 103 LAUREL TREE WAY BRANDON, FL 33511

SIGNATURE: 🛆

SIGNATURE AND TYPED OR

## DO NOT WRITE IN THIS SPACE

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  SCOTT Gregory Johnson, President, July 11, 2008  (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOW!!! FEE IS \$150,00  Due by September 12, 2008  9. Election Campaign Financia  Trust Fund Contribution.			cing 🔲	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE S JOHNSON, PAMELA A 111 HICKORY CREEK BLVD. BRANDON, FL 33511	CTORS -			U00000954522 U7/14/U8-80003-021 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, SCOTT G 103 LAUREL TREE WAY BRANDON, FL 33511					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, GREORY P 111 HICKORY CREEK BLVD. BRANDON, FL 33511			DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP			į	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY+ST-ZIP			!			
TITLE NAME STREET ADDRESS CLTY+ST-ZIP						
12. I hereby 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 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 attact ment with an address, with all other like empowered.						

Scott G. Johnson

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/2008

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