2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000048565

1. Entity Name

70 LAND CORP.

Principal Place of Business Mailing Address 3651 CORTEZ RD. W., STE, 300 3651 CORTEZ RD. W., STE. 300 **BRADENTON FL 34210-3106 BRADENTON FL 34210** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0769688 Not Applicable \$8.75 Additional Country Zio Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DEITRICH, DAVID K Street Address (P.O. Box Number is Not Acceptable) 1111 3RD AVE., W., STE. 350 **BRADENTON FL 34205** 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE BUSKIRK, FRANK A. NAME 3651 CORTEZ ROAD W. SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34210** CITY-ST-ZIP ☐ Addition Change Delete TITLE GRAVELY, JEFFREY D. NAME 3651 CORTEZ ROAD W., SUITE 300 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition TITLE TITLE □ Delete SUMMERS, STEVE E. NAME NAME 3651 CORTEZ ROAD W., SUITE 300 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7tP CITY-ST-ZIP ☐ Change Addition □ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 11 or Block 12 if

STEVE E. SUMMERS

ess, with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 21, 2000 8:00 am Secretary of State

04-21-2000 90138 047 ***150.00