2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000057243

Entity Name: CRYSTAL FALLS LAND COMPANY

FILED Apr 20, 2005 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|

INTERSECTION HWY 315 AND 316 11514 EAST HWY. 316 US FT. MC COY, FL 32134 FT. MC COY, FL 32134

Current Mailing Address: New Mailing Address:

PO BOX 188

FT. MC COY, FL 32134 US

FEI Number: 59-3454499 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREENE, C. R III P O BOX 188

FT. MC COY, FL 32134 US

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.

SIGNATURE:

City-St-Zip:

Electronic Signature of Registered Agent Date

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

FT. MC COY, FL 32134

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FT. MC COY, FL 32134

Title: DST () Delete Title: (X) Change () Addition

GREENE, C. R III GREENE, C. R III Name: Name: 11514 E HWY 316 P O BOX 188 Address: Address: City-St-Zip: FT. MC COY, FL 32134 City-St-Zip: FT. MC COY, FL 32134

Title: DVP Title: DVP (X) Change () Addition () Delete

SEYLER, EDWARD K Name: SEYLER, EDWARD K Name: 11514 E. HWY 316 P O BOX 188 Address: Address:

() Delete Title: Title: DP DP

(X) Change () Addition GREENE, JACK A GREENE, JACK A Name: Name:

11514 E HWY 316 P O BOX 188 Address: Address:

City-St-Zip: FORT MC COY, FL 32134 City-St-Zip: FORT MC COY, FL 32134

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. RAY GREENE, III DST 04/20/2005