


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000005161


1. Entity Name
 ORLANDO LAND INVESTMENT AND DEVELOPMENT INC.



Principal Place of Business: 11 CHURCH STREET #200 TORONTO, ONTARIO CANADA, M5E -1W1 CA

Mailing Address: 11 CHURCH STREET #200 TORONTO, ONTARIO CANADA, M5E -1W1 CA

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04212004 No Chg-P CR2E034 (10/03)

4. FEI Number: 98-0180938 Applied For: Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, RALPH
 6003 RIVERSIDE DRIVE
 YANKEETOWN, FL 34498

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DV
NAME	JACOBSON, RUSSELL G
STREET ADDRESS	11 CHURCH STREET #200
CITY - ST - ZIP	TORONTO, ONTARIO M5E 1W1,
TITLE	DPS
NAME	STEIN, MICHAEL
STREET ADDRESS	11 CHURCH STREET #200
CITY - ST - ZIP	TORONTO, ONTARIO M5E 1W1,
TITLE	DV
NAME	BHARUCHA, YAZDI
STREET ADDRESS	11 CHURCH STREET #200
CITY - ST - ZIP	TORONTO, ONTARIO M5E 1W1,
TITLE	DV
NAME	POWERS, THOMAS E
STREET ADDRESS	11 CHURCH STREET #200
CITY - ST - ZIP	TORONTO, ONTARIO M5E 1W1,
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

SIGNATURE: Russell Jacobson 04/26/04 (416) 861-5753

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #