
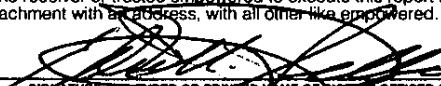


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P98000024623		
1. Entity Name TOP SIDE LAND, INC.		
Principal Place of Business 3585 S.E. ST. LUCIE BLVD. STUART, FL 34997	Mailing Address 3015 S.E. ST. LUCIE BLVD. STUART, FL 34997	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SELLIAN, EDWARD M 3015 S.E. ST. LUCIE BLVD. STUART, FL 34997		DO NOT WRITE 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 the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEHNER, JOSEPH 3585 SE ST LUCIE BLVD STUART, FL 34997	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SELLIAN, EDWARD M 3015 S.E. ST. LUCIE BLVD. STUART, FL 34997	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SELLIAN, SUZAN 3015 S.E. ST. LUCIE BLVD. STUART, FL 34997	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-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 attachment with an address, with all other like empowered.		
SIGNATURE: 		4-24-08 772-781-2581 <small>Date Daytime Phone #</small>

04242008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0851827	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U000000829261
05/21/08-80051-013 150.00

**DO NOT WRITE
IN THIS SPACE**