
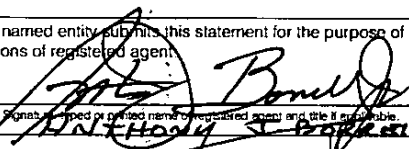
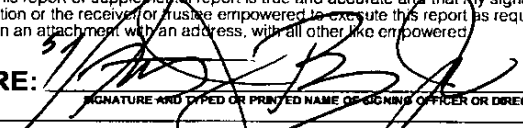


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90016 014 ***158.75

DOCUMENT # P98000026329 1. Entity Name WILBEY LAND CORPORATION					
Principal Place of Business 3601 N. NEBRASKA AVENUE TAMPA, FL 33603-5094			Mailing Address 3601 N. NEBRASKA AVENUE TAMPA, FL 33603-5094		
2. Principal Place of Business 3536 N. Nebraska A		3. Mailing Address P.O. Box 172119			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Tampa, FL		City & State Tampa, FL		4. FEI Number 59-3507634	
Zip 33603		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BORRELL, ANTHONY J JR. 3511N. NEBRASKA AVE TAMPA, FL 33603		7. Name and Address of New Registered Agent Name BORRELL, ANTHONY J. JR Street Address (P.O. Box Number is Not Acceptable) 3536 N. Nebraska Av. City Tampa, FL Zip Code 33672			
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  DATE 2-13-06 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST BORRELL, ANTHONY J JR. 3536 N NEBRASKA AVE TAMPA, FL 33603	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST BORRELL, ANTHONY J. JR P. O. Box 172119 Tampa, FL 33672-0119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS BORRELL, A. JOSEPH III 3536 N NEBRASKA AV TAMPA, FL 33603	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS BORRELL, William J P.O. Box 172119 Tampa, FL 33672-0119
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		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: 			2/15/06 813-251-5050 Date Daytime Phone #		

Anthony J. Borrell, Jr.
President

15875