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2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
06 APR 13 AM 7:37
SECRETARY OF STATE
TALLAHASSEE 50008679

DOCUMENT # P98000053676

1. Entity Name
S & S EQUITY LAND BANK CORPORATION

Principal Place of Business	Mailing Address
2801 EVANS STREET HOLLYWOOD, FL 33020	2801 EVANS STREET HOLLYWOOD, FL 33020

01302006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
2080C Tigertail Blvd	2080 C Tigertail Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Dania FL	City & State: Dania FL
Zip: 33004 Country: US	Zip: 33004 Country: US

4. FEI Number: 65-0852060 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

STAMPLER, HARRY P
2801 EVANS STREET
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable): 2080 C Tigertail Blvd
City: Dania FL Zip Code: 33004

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: Harry Stampler 3.27.06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	PVST STAMPLER, HARRY P 2801 EVANS STREET HOLLYWOOD, FL 33020	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2080C Tigertail Blvd Dania FL 33004	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	4/14	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Harry Stampler 3.27.06 954.921.8888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #