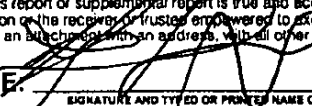


2006 FOR PROFIT CORPORATION ANNUAL REPORT

04-03-2006 90412 022 ***150.00
P98000053676

DOCUMENT # P98000053676		
1. Entity Name S & S EQUITY LAND BANK CORPORATION		
Principal Place of Business 2801 EVANS STREET HOLLYWOOD, FL 33020		Mailing Address 2801 EVANS STREET HOLLYWOOD, FL 33020
2. Principal Place of Business 2080C Tigertail Blvd Suite, Apt. #, etc.	3. Mailing Address 2080 C Tigertail Blvd Suite, Apt. #, etc.	
City & State Dania FL	City & State Dania FL	4. FEI Number 65-0852060
Zip 33004	Country US	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		01302006 Chg-P CR2E034 (11/05)
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) 2080C 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 renewing) DATE		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		
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
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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 attached document with an address, with all other like empowered.		
SIGNATURE  Harry Stampler 3.27.06 954.921.0000 Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		

FILED

06 APR 13 AM 7:37

STATE OF FLORIDA
TALLAHASSEE, FL 32304
50008679

