

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90111 004 ***158.75

DOCUMENT # P99000019181

1. Entity Name
BRYAN LAND CORPORATION



Principal Place of Business
9485 EL CLAIR RANCH ROAD
BOYNTON BEACH FL 33437

Mailing Address
9485 EL CLAIR RANCH ROAD
BOYNTON BEACH FL 33437

2. Principal Place of Business

224 TURNBERRY COURT N
Suite, Apt. #, etc.

3. Mailing Address

224 TURNBERRY COURT N
Suite, Apt. #, etc.

City & State

ATLANTIS FL

City & State

ATLANTIS FL

4. FEI Number

65-0899100

Applied For

Not Applicable

Zip

33462-1022

Country

USA

Zip

33462-1022

Country

USA

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

REEVES, RONALD
9485 EL CLAIR RANCH ROAD
BOYNTON BEACH FL 33437

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

224 TURNBERRY COURT NORTH

City

ATLANTIS

FL

Zip Code

33462-1022

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 *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-20-2003

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **REEVES, MADELINE**
STREET ADDRESS **9485 EL CLAIR RANCH ROAD**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE **D** ☐ Delete
NAME **REEVES, RONALD**
STREET ADDRESS **9485 EL CLAIR RANCH ROAD**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **224 TURNBERRY COURT NORTH**
CITY-ST-ZIP **ATLANTIS FL 33462-1022**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **224 TURNBERRY COURT NORTH**
CITY-ST-ZIP **ATLANTIS FL 33462-1022**

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-2003

Date

561-969-6493

Daytime Phone #

CR2E034 (10/02)