FILED
Apr 22, 2003 8:00 am
Secretary of State

4/4/

04-04-2003 90111 044 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

JJU60JJU

DOCUMENT # P99000062243

1. Entity Name
SOUTH & WEST LAND COMPANY

Principal Place of Business	Mailing Address
3008 HWY 95A SOUTH PENSACOLA, FL 32534	10391 OLD DAIRY LN PENSACOLA, FL 32534

2. Principal Place of Business	3. Mailing Address
3040 Highway 95-A S	
Suite, Apt. #, etc.: Cantonment, Fl.	Suite, Apt. #, etc.
City & State	City & State
Zip: 32533 Country: USA	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3597091 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

CAMPBELL, C R
3008 HWY 95A SOUTH
PENSACOLA, FL 32534

7. Name and Address of New Registered Agent

Name: C.R. Campbell Sr.
Street Address (P.O. Box Number Is Not Acceptable): 3040 Highway 95-A South
City: Cantonment FL Zip Code: 32533

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] Date: 4-18-03

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

FILING 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAMPBELL, C R P O BOX 7006 PENSACOLA, FL 32534 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C.R. Campbell Sr. 10391 old Dairy Lane Pensacola, Fl. 32534 P/D ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Eleanor Faye Campbell 10391 old Dairy Lane Pensacola, Fl. 32534 ST/D ☑ 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	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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] 2/20/03 8504782795

Signature and typed or printed name of signing officer or director — Date — Daytime Phone #