2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S11402

Entity Name: SEMINOLE LAND CO.

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX 1177 OKEECHOBEE, FL 34973				269 NW 9TH STREET OKEECHOBEE, FL 34972	
Current Mail	ling Address	:	New Mailing Addres	s:	
P.O. BOX 117 OKEECHOBE	77 EE, FL 34973	3			
FEI Number: 65	5-0235538	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and A	ddress of Cu	ırrent Registered Agent:	Name and Address of	of New Registered Agent:	
WALPOLE, E 269 NW 9TH OKEECHOBE		2 US			
The above na in the State of		ubmits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:	;. 				
	Electronic	Signature of Registered Age	nt	Date	
Election Campa	aign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Address: 2	O () [WALPOLE, EDW 269 NW 9TH ST DKEECHOBEE, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: W Address: 2	/P () [WALPOLE, JAY, 2595 NW 8ST DKEECHOBEE, I	Delete	Title: Name:	() Change () Addition	
			Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH A. WALPOLE ST 01/09/2009