

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Dorinda B. Mathison  
Secretary of State  
Tallahassee, Florida 32399-0001

APPROVED  
AND  
FILED

95 MAY 27 10:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **S72600** (7)  
AUBURN LAND COMPANY

Principal Place of Business: % DRENNEN L. WHITMIRE, JR. 12201 AREACA DRIVE WEST PALM BEACH FL 33414  
Mailing Address: % DRENNEN L. WHITMIRE, JR. 12201 AREACA DRIVE WEST PALM BEACH FL 33414

2. Principal Place of Business: 21 State Apt. #: 22 City & State: 23 Zip: 24  
2a. Mailing Address: 26 State Apt. #: 27 City & State: 28 Zip: 29

3. Date Incorporated or Qualified: 08/12/1991  
3a. Date of Last Report: 04/25/1994  
4. FCI Number: 65-0279304  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under the 1993 Florida Statutes: Yes/No

9. Name and Address of Current Registered Agent: WHITMIRE, DRENNEN L JR 500 SOUTH AUSTRALIAN AVE STE 800 WEST PALM BEACH FL 33401  
10. Name and Address of New Registered Agent: 81 Name: WHITMIRE, DRENNEN L. JR. 82 Street Address (P.O. Box Number is Not Acceptable): 500 South Australian Avenue 83 Suite 800 84 City: West Palm Beach, FL 85 Zip Code: 33401

11. Pursuant to the provisions of Sections 609.01(4)(c) and 609.02(1)(b) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of a registered agent under Florida Statutes.  
SIGNATURE: [Signature] VP Drennen L. Whitmire, Jr. VP 5/19/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995	
12.1 NAME: PD MEADORS, ARTHUR N	12.2 STREET ADDRESS: 1920 47TH AVENUE VERO BEACH FL	13.1 NAME:	13.2 STREET ADDRESS:
12.3 CITY, STATE, ZIP:	12.4 CITY, STATE, ZIP:	13.3 NAME:	13.4 STREET ADDRESS:
12.5 NAME: VD YODER, ALBERT W.	12.6 STREET ADDRESS: 11439 SAXON CT JACKSONVILLE FL	13.5 NAME:	13.6 STREET ADDRESS:
12.7 CITY, STATE, ZIP:	12.8 CITY, STATE, ZIP:	13.7 NAME:	13.8 STREET ADDRESS:
12.9 NAME: VD WHITMIRE, DRENNEN L JR	12.10 STREET ADDRESS: 12201 AREALA DR W PALM BCH FL	13.9 NAME:	13.10 STREET ADDRESS:
12.11 CITY, STATE, ZIP:	12.12 CITY, STATE, ZIP:	13.11 NAME:	13.12 STREET ADDRESS:
12.13 NAME:	12.14 STREET ADDRESS:	13.13 NAME:	13.14 STREET ADDRESS:
12.15 CITY, STATE, ZIP:	12.16 CITY, STATE, ZIP:	13.15 NAME:	13.16 STREET ADDRESS:
12.17 NAME:	12.18 STREET ADDRESS:	13.17 NAME:	13.18 STREET ADDRESS:
12.19 CITY, STATE, ZIP:	12.20 CITY, STATE, ZIP:	13.19 NAME:	13.20 STREET ADDRESS:

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and equally for the corporation stated in Section 609.01(4)(c) Florida Statutes. I further certify that the information indicated on this annual report of the corporation is true and correct and that my signature shall have the same legal effect as if made under oath. That there are no other changes to the corporation of the registered office or board of directors empowered to make this report as required by Chapter 609 Florida Statutes, and that my name appears on Block 1, or Block 1a, of a completed annual report with an address.  
SIGNATURE: [Signature] VP Drennen L. Whitmire, Jr. VP 5/19/95 X07833 XJXX