FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S75396 (9)

F & T LAND CORPORATION

	At-W- v. Address
Principal Place of Business	Mailing Address
4450 LAFAYETTE STREET MARIANNA FL 32446	4450 LAFAYETTE STREET MARIANNA FL 32446
2. Principal Place of Business	2a. Mailing Address
21	26

FILED Feb 05 1998 8:00am Secretary of State



2. Data Decorporated or Qualified	MARIANNA FL	MAHIANNA FL 32446 MAHIANNA FL 32446			DO NOT WRITE IN THIS SPACE			
2							3. Date Incorporated or Qualified	
2							08/22/1991	
Suite, Apt #, etc. 22 27 27 27 27 27 27 27	2. Principal Place of Business 2a. Mailing Address							Applied For
Sulte, Apt P, etc. Sulte,						57-0941093	Not Applicable	
City & State City Country City			Suite, Apt. #, etc.	Apt. #, etc.				\$8.75 Additional
City & State Country	22		27				5. Certificate of Status Desired	Fee Required
28			City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
28	28					Trust Fund Contribution		
9. Name and Address of Current Registered Agent BONDURANT, FRANK E. 4450 LAFAYETTE STREET MARIANNA FL 32446 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 in flamilar with, and accept the obligations of, Section 607,0502 and 607,1508, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. EXPENSIVE AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. EXPENSIVE AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. EXPENSIVE AND DIRECTORS 14. AGRICAL STREET ADDRESS CITY-ST-2P TILE VTS DELETE 11. TITLE CANTON NY DE		Country	Zip		Country		8. This corporation owes or has paid the cur	rent year Intangible
BONDURANT, FRANK E. 4450 LAFAVETTE STREET MARIANNA FL 32446 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE DEFICIES AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME PD DELETE 11 TIME 12 Medition TUMASZIK, PATRICIA G. 7107 ENFIELD DR 7407 ENFIELD DR	24	25	29	30			Personal Property Tax due June 30.	XIYes □ No
BUNDURANT, FRANK E. 4450 LFAYETTE STREET MARIANNA FL 32446 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City FL 85 Zip Code		9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent
### Addition #### Addition #### Addition #### Addition #### Addition #### Addition ####################################	BO	NDURANT, FRANK F.			81	Name		
MARIANNA FL 32446 83 64 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Plorida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, or an accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutorized by the corporation's board of directors. I hereby accept the appointment as registered depend directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending to the corporation's board of directors. I hereby accept the appointment as registered depending the corporation's board of directors. I hereby accept the appointment as registered depending the corporation's board of directors. I hereby accept the appointment as registered depending th	·				COLOR District (D.O. Con Niget of Net Associable)			
B3					821 Street Address (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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 are familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITILE PD D DELETE 1.1 ITILE PD D STREET ADDRESS CITY-ST-2P TITLE VTS DELETE 1.4 CITY-ST-2P TITLE D DELETE 2.1 TITLE D DELETE 3.1 TITLE D DELETE 3.1 TITLE D CANTON NY 3.2 CITY-ST-2P TITLE D DELETE 4.1 TITLE D CHange Addition MAGE FUNKHOUSER, SANDRA G. 2.2 STREET ADDRESS CITY-ST-2P TITLE D DELETE 3.1 TITLE D CHANGE ACTIV-ST-2P TITLE D DELETE 4.1 TITLE D CHANGE ACTIV-ST-2P TITLE D DELETE 3.1 TITLE D CHANGE ACTIV-ST-2P ACTIV-ST-2P ACTIV-ST-2P TITLE D CHANGE ACTIV-ST-2P ACTIV-ST-2P ACTIV-ST-2P TITLE D CHANGE ACTIV-ST-2P ACTIV-ST-2P TITLE D CHANGE ACTIV-ST-2P ACTIV-ST-2P ACTIV-ST-2P TITLE D CHANGE ACTIV-ST-2P ACTIV-ST-	MAHIANIYA FL 32440				83			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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 under florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0508, Florida Statutes.								
SIGNATURE SIGNATURE Signature, hyped or presed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reincating) DATE						,		. '
SIGNATURE SIGNATURE Signature, hyped or presed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reincating) DATE	11. Pursuant I	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the	abovi	e-named corpo	ration submits this statement for the purpose o	changing its registered
SIGNATURE SIGNATURE Signature, hyped or presed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reincating) DATE	office or re agent. I ar	egistered agent, or both, in the State of m familiar with, and accept the obliga	of Florida. Such change was tlons of, Section 607.0505, F	author Iorida S	ized by Statutes	the corporatio	in's board of directors. I hereby accept the app	ointment as registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD	SIGNATURE							
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			DILL!	6.		ADDRESS		
CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby cartify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	STREET ADDRESS		_ bitte	6. 6.	.3 STREET			_ , _

indicated on this annual report or supplied with this limit does not quality in the exemption stated in declared in the same legal effect as if made under out; 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 12 or Block 13 if changed, or on an attachment with an address.

30 Jan 98

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