## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # V31235

1. Entity Name

FLEMING LAND COMPANY, INC.



FILED Mar 05, 2008 08:00 A Secretary of State

Principal Place of Business

13400 HIGHWAY 77

LAKE MERIAL, FL 32409 U

Mailing Address

13400 HIGHWAY 77

LAKE MERIAL, FL 32409

US



## DO NOT WRITE IN THIS SPACE

03042008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3125327

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLEMING, GEORGE R 13400 HIGHWAY 77 LAKE MERIAL, FL 32409

## DO NOT WRITE IN THIS SPACE

LAKE WILKIAL, FE 32409			IN THIS SPACE			
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and acce	
SIGNATURE_	Signature, typed or printed name of registered agent and title it	1 applicable. (NOTE: Registered	Agent signature	(gottataner rematating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees		\$5.00 May Be		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT VD FLEMING, RAY MAX 13400 HIGHWAY 77 LAKE MERIAL, FL 32409 PD FLEMING, GEORGE R 13400 HIGHWAY 77	CTORS		U00000848295 03/20/08-80012-001 150.00		
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D HECHT, MAXIE F 13400 HIGHWAY 77 LAKE MERIAL, FL 32409			DO	O NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE						

12. Thereby certify that the information supplied with this filling doce not qualify for the elemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is the 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 the 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

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-08

Daytime Phone #