Pala 2

## 26/01 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V31973  1. Entity Name								. •	U	0		•
CITRUS	COUNTY	LAND CORP.		FILED								
Principal Plac	<u> </u>	<del> </del>			- 01 JAN 24 PM 3: 24							
Principal Place of Business  THE PRENTICE HALL CORPORATION SYSTEM INC 1201 HAYS STREET. STE. 105 TALLAHASSEE FL 32301 US  2. Principal Place of Business			Mailing Address  * THE PRENTICE HALL CORPORATION SYSTEM INC 1201 HAYS STREET. STE. 105 TALLAHASSEE FL 32301 US  3. Mailing Address			M INC	SEGRETARY OF STATE TALLAHAGSEE, FLORIDA					
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State				4. FEI Number	65-0334916	•	Applied For Not Applicable		
Zip	Country		Zip Cour		intry					3.75 Additional e Required		
	6. Name	and Address of Current I	Registered Agent				7. Name and A	ddress of New Reg	istered Age	ent		]
THE PRENTICE HALL CORPORATION SYSTEM,INC.					Name Street A	ddress (P.O. Box Number is Not Acceptable)						
1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301					Sireer Ar	duless (F.	O. Box Number	s Not Acceptable)			· · · · · · · · · · · · · · · · · · ·	4
			·		City				FL	Zip Code	9	-
8. The above	named entit	y submits this statement for	the purpose of changing it	s register	l ed office or	registered	d agent, or both,	in the State of Florid	a.			1
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicable. (NO	TE: Registere	d Agent signatu	ure required w	hen reinstating)		DATE			
Tax filing r		ible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Stat				Trust	ion Campaign Finand Fund Contribution.	cing		O May Be I to Fees	
11.		OFFICERS AND I		12.				HANGES TO OFFICE	RS AND D	IRECTORS	S IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	301 S. CO	IN, ROBERT L DLLEGE ST. TE NC 28288-0630	☐ Delete							] Change	Addition	E024 (40,000)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Drake, D 301 S. CO		Delete		E Eet address -st-zip	Seer Jevri 301 S Char	etery M. Mi College lotte No	ller, Jr. st. c. 28288-0		] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WERTZ, L 301 S. CO		☐ Delete				<b>,</b>			] Change	Addition	200
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEMBO, K 301 S. CO		☐ Delete				901	000357	7351	J) (A) JO		ž.
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			. Delete						-	Change	Addition	
13. i hereby d	certify that th	e information supplied with	this filing does not qualify for	or the exe	mption stat	ed in Sect	ion 119.07(3)(i).	Florida Statutes. I fu	rther certify	that the in	formation	1

of the corporation of the receiver of trustee empowered to execute 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 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

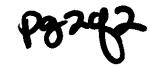
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-01

704-215-2403

Daytime Phone #





ACCOUNT NO. : 072100000032

REFERENCE: 975779 167868A

AUTHORIZATION: 10

COST LIMIT : \$ 150.00

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ORDER DATE : January 24, 2001

ORDER TIME : 1:56 PM

ORDER NO. : 975779-010

CUSTOMER NO: 167868A

Dorsonler Tableson Table 1

CUSTOMER: Beverly Jackson, Legal Asst First Union Corporation

One First Union Center, Nc0630

Legal Division-31st Floor Charlotte, NC 28288-0630

## ANNUAL REPORT FILING

NAME: CITRUS COUNTY LAND CORP.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sandra Mathis ext. 1165

EXAMINER'S INITIALS:

OT JAN 24 PM 2:31

OT JAN 24 PM 2:31

DEPARIMENT OF STATE
DIVISION OF CORPORATION
OF CORPORATION OF CORPORATION