

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90223 026 ***150.00

DOCUMENT # **V65672**

1. Entity Name
REDLAND DEVELOPMENT, INCORPORATED



Principal Place of Business

~~432 1/2 STOKLEY ROAD~~
WILMINGTON NC 28403
US

Mailing Address

~~432 1/2 STOKLEY ROAD~~
WILMINGTON NC 28403
US

2. Principal Place of Business

2250 Bel Arbor Place
Suite, Apt. #, etc.

3. Mailing Address

2250 Bel Arbor Place
Suite, Apt. #, etc.

City & State

Wilmington NC

City & State

Wilmington NC

4. FEI Number

65-0367477

Applied For

Not Applicable

Zip

28403

Country

US

Zip

28403

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~SORENSEN, MARTIN A~~
~~8482 S.E. DUNCAN STREET~~
~~HOBE SOUND FL 33455~~

1057 Oak Forest Circle
Port Orange FLA
32129

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Martin A. Sorensen
MARTIN A. SORENSEN
President

1/10/03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** Delete
NAME **SORENSEN, MARTIN A.**
STREET ADDRESS **132 1/2 STOKLEY ROAD**
CITY-ST-ZIP **WILMINGTON NC 28403**

TITLE Change Addition
NAME
STREET ADDRESS **2250 Bel Arbor Place**
CITY-ST-ZIP

TITLE **S** Delete
NAME **JENKINS, ROBIN A**
STREET ADDRESS **132 1/2 STOKLEY ROAD**
CITY-ST-ZIP **WILMINGTON NC 28403**

TITLE Change Addition
NAME
STREET ADDRESS **2250 Bel Arbor Place**
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
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TITLE Change Addition
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TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Martin A. Sorensen
MARTIN A. SORENSEN **1/10/03** **910-443-2700**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #