FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL												
OMB Number:		3235-028										
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Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					ors	Section	1 30(h)	of the	Investn	nent C	ompany Act	of 1940							
1. Name and Address of Reporting Person* <u>Wintergreen Advisers, LLC</u>						2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED TOMOKA LAND CO CTO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) (First) (Middle)														Offic belo	er (give ti w)	tle		ner (specify ow)	
333 ROUTE 46 WEST SUITE 204						3. Date of Earliest Transaction (Month/Day/Year) 04/04/2007													
(Street) MOUNT	OUNTAIN NI 07046					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																
		Tabl	e I - N	lon-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefici	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/Y				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 of Disposed Of (D) (Instr. 3) of Disposed Of (D) (D) (Instr. 3) of Disposed Of (D)						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)			(mau. 4)	
Common Stock ⁽¹⁾ 04/04/20				007	07		P		100	A	\$74.75	5 1,043,622		I		By advisory clients of Wintergreen Advisers, LLC			
		Та	ble II								osed of, convertib			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exec (Month/Day/Year) if any	if any	ition Date, Tran		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersl Form: Direct (E or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
			Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Number of Shares								

Explanation of Responses:

1. These securities may be deemed to be beneficially owned by Wintergreen Advisers, LLC (the "Reporting Person") the investment manager of Wintergreen Fund, Inc. and other advisory clients. The Reporting Person disclaims beneficial ownership of the reported securities except to the extent of its pecuniary interest therein. The Reporting Person has no pecuniary interest in the securities beneficially owned by Wintergreen Fund, Inc. This report shall not be deemed an admission that the Reporting Person is the beneficial owner of the reported securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

> Wintergreen Advisers, LLC by: /s/ David J. Winters, Managing 04/09/2007 <u>Member</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.