13 APR 2001 CA# 100 4150.00 to, 15=#150,75 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 543475

1. Entity Name LAN DEVE	LOPMENT COMPANY							
Principal Place o	f Business	Mailing Address						
3939 BLOOMING P PALM HARBOR FL US		3939 BLOOMING HILL LANE PALM HARBOR FL 34684 US						
2. Principal Place of Business		3. Mailing Addre	ss					
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.					
City & State		City & State	City & State					
Zip	Country	Zip	Country					

FILED Apr 17, 2001 8:00 am Secretary of State 04-17-2001 90018 025 ***158.75



Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
City & State		City & State		4 . F	El Number	59-17613	38		pplied For ot Applicable		
	Country	Zip	Country		5. C	Certificate of	Status Desired	X	\$8.75 Ad Fee Require	ditional ed	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
13	. /	F		Name -		•.	-		÷	•	
MONA, MICHAEL P. N. 3939 BLOOMING HILLS LANE PALM HARBOR FL FL 34684				Street Address (P.O. Box Number is Not Acceptable)							
Transfer of the Control of the Contr					City FL Zip Code						
e named entity	y submits this statement for th	ne purpose of changing its	registere	ed office or re	egistered age	ent, or both, i	n the State of f	Florida.			
Signature, typed	or printed name of registered agent and	title if applicable. (NOTE	: Registere	d Agent signature i	required when rei	nstating)		DATE	•		
Tax filing requirement and elects to do so. After MAY 1, 2001			01 Fee	will be \$550	0.00			_		00 May Be d to Fees	
	OFFICERS AND DI	RECTORS	12.		ADO	DITIONS/CH	ANGES TO OF	FICERS AN	ID DIRECTOR	S IN 11	
3939 BLO	OMING HILL LANE	☐ Delete	NAMI STRE	E ET ADDRESS					☐ Change	☐ Addition	
VPS MONA, N 3939 BLO	ELLY E. IOMING HILL LANE	☐ Delete	NAMI STRE	E ET ADDRESS					☐ Change	☐ Addition	
		Delete _	NÂM! STRE	ET ADDRESS	· · · · ·	3~u^ -		~	Change	☐ Addition	
		☐ Delete	NAMI STRE	E Et address					☐ Change	Addition	
		☐ Delete	NAME STRE	ET ADDRESS					☐ Change	☐ Addition	
certify that the	information supplied with th	☐ Delete	NAME STREE CITY-	ET ADDRESS ST-ZIP	in Section 1	19 07(3)(i) F	Ilorida Statutes	. I further ce	Change	Addition	
	6. Name NA, MICHAE 9 BLOOMIN M HARBOR e named entity Signature, typed oration is elig requirement a ria on back) DPT MONA, M 3939 BLO PALM HA VPS MONA, N 3939 BLO PALM HA	Country 6. Name and Address of Current Re NA, MICHAEL P. N. 9 BLOOMING HILLS LANE M HARBOR FL FL 34684 E named entity submits this statement for the Signature, typed or printed name of registered agent and oration is eligible to satisfy its Intangible requirement and elects to do so. wia on back) OFFICERS AND DI DPT MONA, MICHAEL P N 3939 BLOOMING HILL LANE PALM HARBOR FL 34684 VPS MONA, NELLY E. 3939 BLOOMING HILL LANE PALM HARBOR FL 34684	Country Zip 6. Name and Address of Current Registered Agent NA, MICHAEL P. N. 9 BLOOMING HILLS LANE M HARBOR FL FL 34684 e named entity submits this statement for the purpose of changing its Signature, typed or printed name of registered agent and title if applicable. (NOTE oration is eligible to satisfy its intangible requirement and elects to do so. orizing on back) OFFICERS AND DIRECTORS DPT MONA, MICHAEL P N 3939 BLOOMING HILL LANE PALM HARBOR FL 34684 VPS MONA, NELLY E. 3939 BLOOMING HILL LANE PALM HARBOR FL 34684 Delete Delete Delete	Country Zip Country 6. Name and Address of Current Registered Agent NA, MICHAEL P. N. 9 BLOOMING HILLS LANE M HARBOR FL FL 34684 e named entity submits this statement for the purpose of changing its registered agent and title if applicable. (NOTE: Registered requirement and elects to do so. ria on back) OFFICERS AND DIRECTORS DPT	Country Country Zip Country 6. Name and Address of Current Registered Agent NA, MICHAEL P. N. 9 BLOOMING HILLS LANE M HARBOR FL FL 34684 City Signature, typed or printed name of registered agent and title if applicable. Oration is eligible to satisfy its intangible requirement and elects to do so. After MAY 1, 2001 Fee will be \$550. Make Check Payable to Department of SIRET ADDRESS CITY-ST-ZIP TOPT MONA, MICHAEL P N 3939 BLOOMING HILL LANE PALM HARBOR FL 34684 TITLE NAME SIRET ADDRESS CITY-ST-ZIP Delete NAME SIRET ADDRESS CITY-ST-ZIP Delete TITLE NAME SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete TITLE NAME SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP Delete SIRET ADDRESS CITY-ST-ZIP	Country Zip Country Zip Country 5. C 6. Name and Address of Current Registered Agent NA, MICHAEL P. N. 9 BLOOMING HILLS LANE M HARBOR FL FL 34684 City In a control of the purpose of changing its registered office or registered agent and title if applicable. Proposition is eligible to satisfy its intangible requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 After MAY 1, 2001 Fee will be \$550.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State OFFICERS AND DIRECTORS DPT MONA, MICHAEL P N 3339 BLOOMING HILL LANE PALM HARBOR FL 34684 UPS MONA, NELLY E. 3339 BLOOMING HILL LANE PALM HARBOR FL 34684 Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete	Country Zip Country 5. Certificate of: 6. Name and Address of Current Registered Agent 7. Name and Active Street Address (P.O. Box Number is Delocation is eligible to satisfy its intangible requirement and electic to do so. In the Amaly 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election on back) PTILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Delocation is eligible to satisfy its intangible requirement and electic to do so. In the Now Street Address (P.O. Box Number is Number is Address (P.O. Box Number is Number is Address (P.O. Box Number is Number is Number is Number is Address (P.O. Box Number is Number	Country Country Zip	Country Zip Country S. Certificate of Status Desired 6. Name and Address of Current Registered Agent NA, MICHAEL P. N. 9 BLOOMING HILLS LANE M HARBOR FL FL 34684 City Fi contains eligible to sately its intamplible requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 After MAY 1, 2001 Fee will be \$550.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State OFFICERS AND DIRECTORS DPT MONA, MICHAEL P N 3399 BLOOMING HILL LANE PALM HARBOR FL 34684 Delete MONA, NELLY E. 3399 BLOOMING HILL LANE PALM HARBOR FL 34684 Delete The NAME SIRET ALORESS CITY-ST-2P Delete TITLE NAME SIRET ALORESS CITY-ST-2P Delete	Country Country Zip Country S. Certificate of Status Desired S8.75 And S8.7	

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 like empowered.

13 APR 2001