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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K50215 (8)
1. Corporation Name
300 LENELL, INC.

Principal Place of Business Mailing Address
100 EXECUTIVE DRIVE, SUITE 340 100 EXECUTIVE DRIVE, SUITE 340
WEST ORANGE NJ 07052 WEST ORANGE NJ 07052

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/08/1988 3a. Date of Last Report 04/13/1994

4. FEI Number 22-2938440 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 1661 ESTERO BLVD 26 1661 ESTERO BLVD
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 SUITE #22 27 SUITE #22
City & State City & State
23 FT. MYERS BEACH, FL 28 FT. MYERS BEACH, FL
Zip Country Zip Country
24 33931 25 USA 29 33931 30 USA

9. Name and Address of Current Registered Agent
CONDOER, GEORGE L, JR.
1625 HENDRY STREET, THIRD FLOOR
FORT MYERS FL 33901

10. Name and Address of New Registered Agent
81 Name LAWRENCE L. PEARCE
82 Street Address (P.O. Box Number is Not Acceptable) 1661 ESTERO BLVD. STE #22
83
84 City FT. MYERS BEACH FL 85 Zip Code 33931

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE LAWRENCE L. PEARCE PRES. J. PEARCE April 21, 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME PEARCE, LAWRENCE L
STREET ADDRESS 100 EXECUTIVE DRIVE #340
CITY-ST-ZIP WEST ORANGE NJ 07052
TITLE VSD
NAME MCCRYSTAL, EDWARD P
STREET ADDRESS 100 EXECUTIVE DRIVE #340
CITY-ST-ZIP WEST ORANGE NJ 07052
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
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CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1661 ESTERO BLVD, STE #22
1.4 CITY-ST-ZIP FT. MYERS BEACH, FL 33931
2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 34 WYOMANT ROAD, P.O. BOX 239
2.4 CITY-ST-ZIP CLEON RIDGE, NJ 08514-0239
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: EDWARD P. MCCRYSTAL 7/12/95 609-758-8972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD P. MCCRYSTAL