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FILED
Feb 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 192108 (9)

1. Corporation Name
LANIER UPSHAW, INC.

Principal Place of Business
1129 U S HIGHWAY 98 SOUTH
P O BOX 468
LAKELAND FL 33802

Mailing Address
1129 U S HIGHWAY 98 SOUTH
P O BOX 468
LAKELAND FL 33802



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

04/03/1956

4. FEI Number

58-0770252

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BULMAN, BRUCE A
1129 US HIGHWAY 98 SOUTH
LAKELAND, FL
LAKELAND FL 33801

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD
NAME CAMMANN, WILLIAM G.
STREET ADDRESS 1129 US HWY 98 S
CITY-ST-ZIP LAKELAND, FL 00000

TITLE VPD
NAME DORMAN, WM. K., II
STREET ADDRESS 1129 US HWY 98 SOUTH
CITY-ST-ZIP LAKELAND, FL 00000

TITLE VPD
NAME READ, JOHNNY M.
STREET ADDRESS 1129 US HWY 98 SOUTH
CITY-ST-ZIP LAKELAND, FL 00000

TITLE VPD
NAME RICHARD C MOTTERN
STREET ADDRESS 1129 US HWY 98 SO
CITY-ST-ZIP LAKELAND FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CD
1.2 NAME C.W. BOVAY
1.3 STREET ADDRESS 1129 US 98 SOUTH
1.4 CITY-ST-ZIP LAKELAND, FL 33801

2.1 TITLE VP
2.2 NAME DORMAN, WM. K., II
2.3 STREET ADDRESS 1129 US HWY 98 SOUTH
2.4 CITY-ST-ZIP LAKELAND, FL 33801

3.1 TITLE PD
3.2 NAME JAMES C. FRANKLIN, JR
3.3 STREET ADDRESS 1129 US 98 SOUTH
3.4 CITY-ST-ZIP LAKELAND, FL 33801

4.1 TITLE VP
4.2 NAME RICHARD C. MOTTERN
4.3 STREET ADDRESS 1129 US HWY 98 SOUTH
4.4 CITY-ST-ZIP LAKELAND, FL 33801

5.1 TITLE S
5.2 NAME BRUCE A. BULMAN
5.3 STREET ADDRESS 1129 US 98 SOUTH
5.4 CITY-ST-ZIP LAKELAND, FL 33801

6.1 TITLE VP
6.2 NAME H.S. TURNER
6.3 STREET ADDRESS 1129 U.S. 98 SOUTH
6.4 CITY-ST-ZIP LAKELAND, FL 33801

14. 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 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.

CR2E034 (10/97)