

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 216794 (8)

1. Corporation Name

LAND AND LEISURE, INC.



000001840780  
-05/28/96--01032--021  
\*\*\*2200.00

Principal Place of Business

Mailing Address

2699 S BAYSHORE DR #800A  
MIAMI FL 33136

2699 S BAYSHORE DR #800A  
MIAMI FL 33136

3. Date Incorporated or Qualified  
10/31/1958

3a. Date of Last Report  
02/27/1995

21 2. Principal Place of Business  
9700 So. Dixie Hwy.

2a. Mailing Address  
9700 So. Dixie Hwy.

4. FEI Number  
59-0860995

Applied For  
Not Applicable

22 Suite, Apt. #, etc.  
Suite 570

27 Suite, Apt. #, etc.  
Suite 570

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State  
Miami, Fl.

28 City & State  
Miami, Fl.

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip  
33156

25 Country

29 Zip  
33156

30 Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAILEY, HUNT, JONES, & BUSTO, P.A.  
501 BRICKELL KEY DR STE 300  
COURVOISIER CENTRE  
MIAMI FL 33131-9608

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 of current or former registered agent (if applicable)

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	S	<input type="checkbox"/> DELETE
NAME	MALCOLM, VI K	
STREET ADDRESS	2699 S BAYSHORE DR #800A	
CITY-STATE-ZIP	MIAMI FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	BAILEY, JOHN R	
STREET ADDRESS	2699 S BAYSHORE DR #800A	
CITY-STATE-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BAILEY, PATRICIA E.	
STREET ADDRESS	2699 S BAYSHORE DR #800A	
CITY-STATE-ZIP	MIAMI FL	
TITLE	ASD	<input type="checkbox"/> DELETE
NAME	BABCOCK, MARY	
STREET ADDRESS	2699 S BAYSHORE DR #800A	
CITY-STATE-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BABCOCK, E. VOSE, III	
STREET ADDRESS	2699 S BAYSHORE DR #800A	
CITY-STATE-ZIP	MIAMI FL	
TITLE	PTD	<input type="checkbox"/> DELETE
NAME	BAILEY, GUY B	
STREET ADDRESS	2699 S BAYSHORE DR #800A	
CITY-STATE-ZIP	MIAMI FL	

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	9700 So. Dixie Hwy., #570
1.4 CITY-STATE-ZIP	Miami, Fl. 33156
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	9700 So. Dixie Hwy., #570
2.4 CITY-STATE-ZIP	Miami, Fl. 33156
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	9700 So. Dixie Hwy., #570
3.4 CITY-STATE-ZIP	Miami, Fl. 33156
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	9700 So. Dixie Hwy., #570
4.4 CITY-STATE-ZIP	Miami, Fl. 33156
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	9700 So. Dixie Hwy., #570
5.4 CITY-STATE-ZIP	Miami, Fl. 33156
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	9700 So. Dixie Hwy., #570
6.4 CITY-STATE-ZIP	Miami, Fl. 33156

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 119.07(3)(k), 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 (changed, or on an attachment with an address.

SIGNATURE:

*Guy B. Bailey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Guy B. Bailey, President

April 22, 1996 (305)670-0303

CR2E034 (12/95)