

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90239 047 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 269482			
1. Corporation Name 40 ACRE CORPORATION			
Principal Place of Business 112 E POINSETTA ST LAKELAND FL 33803-2919 US		Mailing Address 112 E POINSETTA ST LAKELAND FL 33803-2919 US	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		3. Date Incorporated or Qualified 04/29/1963	
2a. Mailing Address		4. FEI Number 59-1009374	
21. Suite, Apt. #, etc.		Applied For Not Applicable	
22. City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. Zip		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Country		7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LAWHON, C.L. JIMMY 2280 LAKELAND HILLS, BLVD LAKELAND FL 33805		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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D NAME: YANCEY, JAMES A. STREET ADDRESS: P.O. BOX 1028 CITY-ST-ZIP: LAKELAND FL 33802 ☐ DELETE		1.1 TITLE: D 1.2 NAME: MICHAEL H. DAVIS 1.3 STREET ADDRESS: 1025 ORANGE CAMP RD. 1.4 CITY-ST-ZIP: DELAND, FL 32724 ☐ Change ☐ Addition	
TITLE: VD NAME: YANCEY, GILLIAN S STREET ADDRESS: 1825 KING JAMES CT CITY-ST-ZIP: LAKELAND FL ☐ DELETE		2.1 TITLE: D 2.2 NAME: BARBARA L. HUGHEY 2.3 STREET ADDRESS: 130 VICTOR RD. 2.4 CITY-ST-ZIP: LAKELAND FL 33809 ☐ Change ☐ Addition	
TITLE: SD NAME: YANCEY, NORMA STREET ADDRESS: 1825 KING JAMES CT CITY-ST-ZIP: LAKELAND FL ☐ DELETE		3.1 TITLE: D 3.2 NAME: RONALD J. HUGHEY 3.3 STREET ADDRESS: 130 VICTOR ROAD 3.4 CITY-ST-ZIP: LAKELAND FL 33809 ☐ Change ☐ Addition	
TITLE: TD NAME: DAVIS, CHARLES H. JR. STREET ADDRESS: 112 E. POINSETT DR. CITY-ST-ZIP: LAKELAND FL 33803 ☐ DELETE		4.1 TITLE: 4.2 NAME: 4.3 STREET ADDRESS: 4.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: VD NAME: DAVIS, JUNE D. STREET ADDRESS: 535 SUSAN DRIVE CITY-ST-ZIP: LAKELAND FL 33803 ☐ DELETE		5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: PD NAME: LAWHON, CLARENCE L. STREET ADDRESS: 2290 LAKELAND HILL BLVD CITY-ST-ZIP: LAKELAND FL 33805 ☐ DELETE		6.1 TITLE: 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP: ☐ Change ☐ Addition	

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, with all other like empowered.

SIGNATURE: *Charles H. Davis Jr.*

DIRECTOR + Treasurer

TD

2/16/1999

941-683-5425

CR2E034 (11/98)