

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

APPROVED
AND
FILED

97 APR 30 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 269482 (6)
1. Corporation Name
40 ACRE CORPORATION
112 E. POINSETTIA STREET
LAKELAND, FLORIDA 33803-2919
Principal Place of Business Mailing Address

3. Date Incorporated or Qualified 04-29-1963
3a. Date of Last Report 2-1996
4. FEI Number 59-1009374
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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

LAWHON, C.L. JIMMY
2290 LAKELAND HILLS BLVD.
LAKELAND, FLORIDA 33805

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME YANCEY, JAMES A.
STREET ADDRESS P.O. BOX 1028
CITY-ST-ZIP LAKELAND, FL 33802
TITLE VD ☐ DELETE
NAME YANCEY, QUILLIAN S.
STREET ADDRESS 1625 KING JAMES CT
CITY-ST-ZIP LAKELAND, FL
TITLE SD ☐ DELETE
NAME YANCEY, NORMA
STREET ADDRESS 1625 KING JAMES CT
CITY-ST-ZIP LAKELAND, FL
TITLE TD ☐ DELETE
NAME DAVIS, CHARLES H. JR.
STREET ADDRESS 112 E. POINSETTIA ST.
CITY-ST-ZIP LAKELAND, FL 33803
TITLE VD ☐ DELETE
NAME DAVIS, JUNE
STREET ADDRESS 535 SUSAN DRIVE
CITY-ST-ZIP LAKELAND, FL 33803
TITLE PD ☐ DELETE
NAME LAWHON, CLARENCE L.
STREET ADDRESS 2290 LAKELAND HILLS BLVD.
CITY-ST-ZIP LAKELAND, FL 33805

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☐ Addition
1.2 NAME DAVIS, MICHAEL H.
1.3 STREET ADDRESS 1025 ORANCE CAMP RD.
1.4 CITY-ST-ZIP DELAND, FL 32724
2.1 TITLE D ☐ Change ☐ Addition
2.2 NAME HUGHEY, BARBARA L.
2.3 STREET ADDRESS 130 VICTOR RD.
2.4 CITY-ST-ZIP LAKELAND, FL 33809
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE 300002169615 ☐ Change ☐ Addition
4.2 NAME -05/07/97--010/1--004
4.3 STREET ADDRESS ****165.00 ****165.00
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 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. 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Printed