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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 288129 1. Corporation Name

LAN-HILL CORP.

FILED
Mar 04, 1999 8:00 am
Secretary of State
02.04.1000.00130.020.***1.50.75

03-04-1999 90128 039



Principal Place of Business Mailing Address							
865 NORTH DIX	KIE HWY		5 NORTH DIXIE HWY				
PO BOX 3318			O BOX 3318				DO NOT WRITE IN THIS SPACE
LANTANA FL 33465			LANTANA FL 33465				3. Date Incorporated or Qualifed
							12/29/1964
	t and Bullion	10-	Mailing Address				4. FEI Number Applied For
2. Principal P	lace of Business	-	. Mailing Address				59-1086402 Not Applicable
21		26	Suite Ant # etc				\$8.75 Additional
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired  Fee Required
22			City & State				
City & Stat	e	-	City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
23	Canada	28	Zin	Col	intry		
Zip ─_ı	Country	<u> </u>	Zip I	30	Ji iu y		8, This corporation owes the current year Intangible Personal Property Tax.   ☑ Yes □ No
24	25	29	otered Agent	30	г.		10. Name and Address of New Registered Agent
	9. Name and Address of Curren	Kegi	stered Agent		81	Name	10. Hame and Address of the Registres rigers
TWI	ITY, SUSAN P						<u> </u>
865 NORTH DIXIE HIGHWAY					82	Street Add	Iress (P.O. Box Number is Not Acceptable)
LANTANA FL 33462					-		
LAN	IANA EL JUTUL				83		
					84	City	85 Zip Code
						·	poration submits this statement for the purpose of changing its registered
SIGNATURE	Signature, typed or printed name of registered agen			<u>-</u> -		t signature require	ad when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	D DIR		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	SD SUPERIOR OF STREET		☐ DELETE	1.1 7			
NAME	TWITTY, SUSAN P			1.2 N			
STREET ADDRESS	865 N DIXIE HWY			1		ADDRESS	
CITY-ST-ZIP	LANTANA FL		□ DELETE		ITY-S	T-ZIP	{ Change ☐ Addition
TITLE	PCD		☐ DELETE	2.1 T		ļ	. Clarige Accident
NAME	HILLBRATH, ARTHUR S JR			2.2 N			
STREET ADDRESS	•			2.3 S	TREET	T ADDRESS	
CITY-ST-ZIP	LANTANA FL				ITY-S	T-ZIP	
TITLE	VP		☐ DELETE	3.1 T			☐ Change ☐ Addition
NAME	HILLBRATH, DOUGLAS S			3.2 N	AME		
STREET ADDRESS	1			3.3 \$	TREET	TADDRESS	
CITY-ST-ZIP	LANTANA FL			_	CITY-S	T-ZIP	
TITLE			☐ DELETE	4.1 T	ITLE	1	☐ Change ☐ Addition
NAME				4.21	NAME		
STREET ADDRESS	[			4.3 S	TREET	ADDRESS	
CITY-ST-ZIP				4.4 0	ITY-S	T-ZIP	
TITLE			☐ DELETE	5.1 T			Change Addition
NAME	]			7	AME		
STREET ADDRESS				5.3 S	TREET	TADDRESS	• ,
CITY-ST-ZIP					ITY-S	T-ZIP	
TITLE			☐ DELETE	6.1 T	ITLE		Change Addition
NAME				6.2 N	IAME	1	·
STREET ADDRESS				6.3 S	TREET	TADDRESS	
	1						

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 arout an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Douglas S. Hillbrath Vice President

561-582-1044