


FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90035 001 ***158.75

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # 288129
 1. Entity Name
 LAN-HILL CORP.



Principal Place of Business
 LAN-HILL
 865 N DIXIE HWY
 LANTANA, FL 33462

Mailing Address
 P.O. BOX 3318
 LANTANA, FL 33465-3318

44024400



01232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1086402	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TWITTY, SUSAN P
 865 NORTH DIXIE HIGHWAY
 LANTANA, FL 33462

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TWITTY, SUSAN P 865 N DIXIE HWY LANTANA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD HILLBRATH, ARTHUR S JR 865 N. DIXIE HWY LANTANA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HILLBRATH, DOUGLAS S 865 N DIXIE HWY LANTANA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Douglas Hillbrath **1/23/2004** **561-582-1044**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #