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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 319661

(5)

BARRY LAND AND DEVELOPMENT COMPANY INC

Principal Place of Business 17718 SW 30 AVE **NEWBERRY FL 320**69

Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



17718 SW 30 AVE NEWBERRY FL 32669 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/10/1967 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-0004929 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žip Country Zio Country 8. This corporation owes or has paid the current year Intangible Yes □ Ño Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BARRY, ROBERT J 17718 SW 30 AVE 82 Street Address (P.O. Box Number is Not Acceptable) **NEWBERRY FL 32669** 63 **B4** City 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 registined agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ Change DELETE 1.1 TITLE ___ Addition TITLE WILLIAMS, KAY B NAME 1.2 NAME **\$121 ORTEGA DRIVE** STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL CITY-ST-ZIP 14 City - St - ZiP __ Addition DELETE Chance TITLE 2.1 TITLE BARRY, ROBERT J NAME 22 NAME 17718 SW 30 AVENUE STREET ADDRESS 2.3 STREET ADDRESS **NEWBERRY FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 3.1 TITLE BARRY, W.N. J NAME 3.2 NAME **West central avenue at NW 4 Street** STREET ADDRESS 3.3 STREET ADDRESS NEWBERRY FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE WILLIAMS, THEODORE B NAME 4. 2 NAME **3853 HERSCHEL STREET** STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAMÉ STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 off-poration 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.