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

FILED PROFIT Apr 06 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 336071 (6) FAN LAND CORPORATION Principal Place of Business Mailing Address 1420 HORSESHOE CREEK ROAD 1420 HORSESHOE CREEK ROAD DAVENPORT FL 33837 DAVENPORT FL 33837 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 10/07/1968</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes p. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 **GLASS.CHARLES E** 1420 HORSE CREEK RD. Street Address (P.O. Box Number is Not Acceptable) DAVENPORT FL 33837 83 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 reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE Addition 1.1 TITLE **CONROY, ANDREW J** NAME 1.2 NAME 125 BAY ST. W. STREET ADDRESS 1.3 STREET ADDRESS DAVENPORT FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE Đ٧ **SUMMERLIN, FREDDIE J.** NAME 2.2 NAME PINK APT. RD. STREET ADDRESS 2.3 STREET ADDRESS DAVENPORT FL CITY-ST-ZIP 2.4 DITY-ST-ZIP DELETE Change Addition TITLE DS 3.1 TITLE NAME GLASS, CHARLES E. STREET ADDRESS 1420 HORSE CREEK RD. 3.3 STREET ADDRESS **DAVENPORT FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition CONROY, ALBERT L. NAME 4. 2 NAME 1 HOLLY HILL DR. STREET ADDRESS 4.3 STREET ADDRESS **DAVENPORT FL** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change THILE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 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 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.

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