COF ANNU	PROFIT PROFIT PORATION JAL REPORT 1998	Secre	IS \$550.00 ARTMENT OF STATE B. Mortham tary of State CORPORATIONS	FILED Apr 14 1998 8:00am Secretary of State	
DOCU 1. Corporatio	MENT # 3966 Name DA LAND TECHNOLOGY	· · · · · · · · · · · · · · · · · · ·			
6018 PEREGRINE AVE. Suite 107		6018 PEREGRINE AVE SUITE 107	,		
ORLANDO FL 32819 US		ORLANDO FL 32819 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				02/28/1972	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-1379123	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State	θ	City & State	······	6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation owes or has p	Added to Fees
24	25 9. Name and Address of Cu	29	30	Personal Property Tax due Jun 10. Name and Address of New R	e 30. 🖸 Yes 🗌 No
YE	BRGEY, D ARTHUR	mem negisteren xgent	81 Name	10, Name and Address of New H	egistered Agent
21	1 N MAGNOLIA AVE		82 Street Add	ress (P.O. Box Number is Not Accepte	ble)
Of	rlando fl		83		· · · · · · · · · · · · · · · · · · ·
					let Zie Code
			64 City		FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the S im familiar with, and accept the c	20502 and 607.1508, Florida Stat State of Florida. Such change wat obligations of, Section 607.0505, I	utes, the above-named corp s authorized by the corpora Florida Statutes.	poration submits this statement for the tion's board of directors. I hereby according to the tion's board of directors of the tion of the	purpose of changing its registered opt the appointment as registered
SIGNATURE	Signature, typed or pointed name of registere	ed agent and title if applicable (N	OTE: Registered Agent signature requi	ired when reinstating)	DATE
12. TITLE	OFFICERS PD		13. 1.1 TITLE	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
NAME	FINCH, WILLIAM F.		1.2 NAME		
STREET ADDRESS	6018 PEREGRINE AVE		1.3 STREET ADDRESS		Line (E
CITY-ST-ZIP	ORLANDO FL	DELETE	1.4 CITY-ST-ZIP		Change Addition C
TITLE	STD Meyer III, charles a		2.1 TITLE 2.2 NAME		
STREET ADDRESS	2601 CARTER GROVE C	R	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ORLANDO, FL 00000	DELETE	2. 4 CITY - ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - 21P		DELETE	34. CITY-ST-ZIP		Change Addition
title Name			4.1 TITLE 4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST-ZIP		Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 City-ST-ZiP		Change Latit
title Name		DELETE	6.1 TITLE 6.2 NAME		Change D Addition
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby of indicated	certify that the information supplie on this annual report or supplen	ed with this filing does not qualify nental annual report is the mid as	for the exemption stated in occurate and that my signate	Section 119.07(3)(i), Florida Statutes. are shall have the same legal effect as wired by Chapter 607, Florida Statutes	I turtner certify that the information if made under oath; that I am an
-4			o ovocuto this remaint and		and that my came concers!
officer or Block 12	director of the corporation or the or Block 13 if changed, or op an	receiver or truster employered to allactilities truster entropy.	o execute this report as req	uired by Chapter 607, Florida Statutes	; and that my name appears in