

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

6-17-96

6-6917

(6)

DOCUMENT # 553125

1. Corporation Name

LANTANA INVESTMENTS, INC.

Principal Place of Business

Mailing Address

224 N 3RD ST
LANTANA FL 33462

224 N 3RD ST
LANTANA FL 33462



2. Principal Place of Business

2a. Mailing Address

21 7200 HIGH RIDGE RD

26 7200 HIGH RIDGE RD

Suite, Apt #, etc

Suite, Apt #, etc

22 LANTANA

27 LANTANA

City & State

City & State

23 LANTANA FL

28 LANTANA FL

Zip

Zip

Country

24 33462

29 33462

25 USA

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

12/06/1977

03/21/1995

4. FEI Number

Applied For

59-1803019

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

LOOMIS, JOHN V
224 N 3RD STREET
LANTANA FL 33462

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7200 HIGH RIDGE RD.

83

84

LANTANA

FL

85 Zip Code

33412

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 agent 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 if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LOOMIS, JOHN V
STREET ADDRESS 7200 HIGH RIDGE RD
CITY-ST-ZIP LANTANA FL

DELETE

TITLE VTS
NAME LOOMIS, JOHN V
STREET ADDRESS 7200 HIGH RIDGE RD 0624
CITY-ST-ZIP LANTANA FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PTD

Loomis John V

7200 HIGH RIDGE RD

LANTANA FL 33412

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

John Loomis

6/11/96

911-582-2821

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)