


FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> DOCUMENT # 574567 1. Corporation Name L & B DEVELOPMENT CORPORATION </div> <div style="font-size: 2em; font-weight: bold;">(4)</div> </div>		
Principal Place of Business 300 FAITH CHURCH RD RTE 3, BOX 300 OLD TOWN FL 32680		Mailing Address 300 FAITH CHURCH RD RTE 3, BOX 300 OLD TOWN FL 32680
2. Principal Place of Business <div style="border: 1px solid black; padding: 2px;">21</div> Suite, Apt. #, etc. <div style="border: 1px solid black; padding: 2px;">22</div> City & State <div style="border: 1px solid black; padding: 2px;">23</div> <div style="display: flex; justify-content: space-between;"> <div>Zip <div style="border: 1px solid black; padding: 2px;">24</div></div> <div>Country <div style="border: 1px solid black; padding: 2px;">25</div></div> </div>	2a. Mailing Address <div style="border: 1px solid black; padding: 2px;">26</div> Suite, Apt. #, etc. <div style="border: 1px solid black; padding: 2px;">27</div> City & State <div style="border: 1px solid black; padding: 2px;">28</div> <div style="display: flex; justify-content: space-between;"> <div>Zip <div style="border: 1px solid black; padding: 2px;">29</div></div> <div>Country <div style="border: 1px solid black; padding: 2px;">30</div></div> </div>	
9. Name and Address of Current Registered Agent		
LORD, LARRY L 300 FAITH CHURCH RD RTE 3, BOX 300 OLD TOWN FL 32680		<div style="border: 1px solid black; padding: 2px;">81</div> Name <div style="border: 1px solid black; padding: 2px;">82</div> Street Address <div style="border: 1px solid black; padding: 2px;">83</div> <div style="border: 1px solid black; padding: 2px;">84</div> City
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, partnership, or limited liability company, is the office or registered agent, or both, in the State of Florida. Such change was authorized by the corporate or partnership agreement, if any, and I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
<small>(NOTE: Registered Agent signature required)</small>		
12. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LORD, LARRY L RTE 3, BOX 300 OLD TOWN FL <div style="text-align: right;"><input type="checkbox"/> DELETE</div>	<div style="border: 1px solid black; padding: 2px;">11</div> TITLE <div style="border: 1px solid black; padding: 2px;">12</div> NAME <div style="border: 1px solid black; padding: 2px;">13</div> STREET ADDRESS <div style="border: 1px solid black; padding: 2px;">14</div> CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD LORD, HAZEL L. RTE 3, BOX 300 OLD TOWN FL <div style="text-align: right;"><input type="checkbox"/> DELETE</div>	<div style="border: 1px solid black; padding: 2px;">21</div> TITLE <div style="border: 1px solid black; padding: 2px;">22</div> NAME <div style="border: 1px solid black; padding: 2px;">23</div> STREET ADDRESS <div style="border: 1px solid black; padding: 2px;">24</div> CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> DELETE</div>	<div style="border: 1px solid black; padding: 2px;">31</div> TITLE <div style="border: 1px solid black; padding: 2px;">32</div> NAME <div style="border: 1px solid black; padding: 2px;">33</div> STREET ADDRESS <div style="border: 1px solid black; padding: 2px;">34</div> CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> DELETE</div>	<div style="border: 1px solid black; padding: 2px;">41</div> TITLE <div style="border: 1px solid black; padding: 2px;">42</div> NAME <div style="border: 1px solid black; padding: 2px;">43</div> STREET ADDRESS <div style="border: 1px solid black; padding: 2px;">44</div> CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> DELETE</div>	<div style="border: 1px solid black; padding: 2px;">51</div> TITLE <div style="border: 1px solid black; padding: 2px;">52</div> NAME <div style="border: 1px solid black; padding: 2px;">53</div> STREET ADDRESS <div style="border: 1px solid black; padding: 2px;">54</div> CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> DELETE</div>	<div style="border: 1px solid black; padding: 2px;">61</div> TITLE <div style="border: 1px solid black; padding: 2px;">62</div> NAME <div style="border: 1px solid black; padding: 2px;">63</div> STREET ADDRESS <div style="border: 1px solid black; padding: 2px;">64</div> CITY - ST - ZIP

14. I do 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.

SIGNATURE: LARRY L. LORD *Larry L. Lord* 4/22/97 352-542-8276