

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90138 029 \*\*\*150.00

DOCUMENT # 574567

1. Corporation Name

L & B DEVELOPMENT CORPORATION

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1978

4. FEI Number

59-1829877

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 300 FAITH CHURCH RD

26 300 FAITH CHURCH RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 H.C. 3, Box 300

27 H.C. 3, Box 300

City & State

City & State

23 OLD TOWN, FL

28 OLD TOWN, FL

Zip

Country

Zip

Country

24 32680

25 DIXIE

29 32680

30 DIXIE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LORD, LARRY L  
300 FAITH CHURCH RD  
RTE 3, BOX 300  
OLD TOWN FL 32680

81 Name

LARRY L. LORD

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

300 FAITH CHURCH RD.

83

H.C. 3, Box 300

84 City

OLD TOWN

85 Zip Code

FL

32680

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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD  
STREET ADDRESS LORD, LARRY L  
CITY-STATE-ZIP RTE 3, BOX 300  
OLD TOWN FL

TITLE ☐ DELETE

NAME STD  
STREET ADDRESS LORD, HAZEL L.  
CITY-STATE-ZIP RTE 3, BOX 300  
OLD TOWN FL

TITLE ☐ DELETE

NAME V  
STREET ADDRESS REAUES, MARK E.  
CITY-STATE-ZIP RT 2 BOX 130  
OLD TOWN FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☒ Change

☐ Addition

☒ Change

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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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY L. LORD

4/26/99

Date

352-542-8274

Daytime Phone #

CR2E034 (1/98)