

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 28 AM 10: 01

DOCUMENT # 589361

(5)

1. Corporation Name

L. KENT LAND CORP.

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/13/1978** 3a. Date of Last Report **02/01/1994**

4. FEI Number **59-1950959** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KENT, LARRY
840-K DELTONA BLVD.
DELTONA, FL K 32725**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. 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

Register (typed or printed name of registered agent and title of corporation)

(Typed) Registered Agent signature required when transferring

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **KENT, LARRY**
STREET ADDRESS **2221 EARLEAF COURT**
CITY, ST, ZIP **LONGWOOD FL**

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **KENT, LARRY**
1.3 STREET ADDRESS **840-K Deltona Blvd.**
1.4 CITY, ST, ZIP **Deltona, FL 32725**

TITLE **VD**
NAME **KENT, REVA C.**
STREET ADDRESS **3136 MASTERS DR**
CITY, ST, ZIP **CLEARWATER FL**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **KENT, REVA C.**
2.3 STREET ADDRESS **3136 Masters Dr.**
2.4 CITY, ST, ZIP **Clearwater, FL 34621**

TITLE **ST**
NAME **SWANSON, JANET M.**
STREET ADDRESS **1413 BIRWOOD ST.**
CITY, ST, ZIP **DELTONA FL**

3.1 TITLE **ST** ☒ Change ☐ Addition
3.2 NAME **KENT, DAVID C.**
3.3 STREET ADDRESS **1882 Marysville Dr.**
3.4 CITY, ST, ZIP **Deltona, FL 32725**

TITLE **VD**
NAME **KENT, SANDRA**
STREET ADDRESS **2221 EARLEAF CT**
CITY, ST, ZIP **LONGWOOD FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

TITLE **VD**
NAME **KENT, DAVID C.**
STREET ADDRESS **1882 MARYSVILLE DR.**
CITY, ST, ZIP **DELTONA FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

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)(b), 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 Kent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/95

(407) 574-6686