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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

(1)

LINDSEY INVESTMENT, CO.

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FILED

Mar 27 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address		s seaten arens trait saite tütin teile tille tille	si mimit miñis miñis Minst Minit ilini
1015 48TH TERR	1015 48TH TERR			
VERO BCH FL 32966	VERO 8CH FL 32966		DO NOT WRITE IN T	HIG GDYCE
			3. Date Incorporated or Qualified	nio orace
			02/23/1979	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-1895715	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Couri	itry Zip	Country	8. This corporation owes or has paid the	current vear Intangible
24 25	29	30	Personal Property Tax due June 30.	Yes □ No
9, Name and Add	ress of Current Registered Agent		10. Name and Address of New Registe	red Agent
LINDSEY, GARY W.		B1 Name		
1015 48TH TERR.		82 Street Add	fress (P.O. Box Number is Not Acceptable)	
VERO BEACH FL			Total Control Don Harrison to Harrison Laboration	
		83		
		84 City		an Zio Cado
		'		FL 85 Zip Code
11. Pursuant to the provisions of Se	ctions 607.0502 and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the purpor	se of changing its registered
agent. I am familiar with, and ac	oth, in the State of Florida. Such change was au ecept the obligations of, Section 607.0505, Flor	utnorized by the corpora rida Statutes.	tion's board of directors, I hereby accept the	appointment as registered
SIGNATURE				
Signature, typed or printed nar		: Registered Agent signature requ	ired when reinstating) DA	TE
····	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE PD	☐ DELETE	1.1 TITLE		Change Addition
NAME LINDSEY, GARY		1.2 NAME		
STREET ADDRESS 1015 48TH TERF		1.3 STREET ADDRESS		
CITY-ST-ZIP VERO BEACH FI		1.4 CITY - ST - ZIP		
TITLE	☐ DELETE	2.1 TITLE		L. Change . Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		Ì
CITY-ST-ZIP		6.4 CłTY - ST - ZIP		

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 roport 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 907, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.