SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(9)

DOCUMENT # Corporation Name

LUMCO, INC.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

FILED Jul 15 1998 8:00am Secretary of State

- P PARALE BOTOL BOTOL BEBOL BEHAL BEBOL 18 DE BEBOL BODOL BEBOL BODOL BEBOL

L						
Principal Plac	e of Business	Mailing Address		1 199140 01191 01811 0 FBD1 0111 0101 1061 01611 0	1 MATERIAL BARAN (M. 1911) 1911 1911	
125 STARR STREET		125 STARR STREET				
P O B 146 OAKLAND FL 34760		P O B 146				
OARLAND FE 34780		OAKLAND FL 34760		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
				02/01/1980		
2. Principal P	lace of Business	2s. Mailing Address		4. FEI Number	Applied For	
21		26		59-1974689	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat	ee .	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zin		28		Trust Fund Contribution	Added to Fees	
Zip	Country 25	Zip	Country	8. This corporation owes or has paid the cur		
[24]	9. Name and Address of Curren		30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No	
LUMMUS, ROBERT A. 8				10. Name and Address of New Registered	Want	
125 STARR STREET						
OAKLAND FL 34760			82 Street Addre	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 conocration 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 jamillar with, and accept the objections of, section 607.0505, Florida Statutes.						
SIGNATURE Cotherine S. Lynning / Catherine 5 Lynnings 1/5/48						
Signature, typed or printed name of registered agent and title if applicable / (NOTE: Regist			E: Registered Agent signature requ	red when reinstating) DATE		
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	LUMMUS, ROBERT A.	DELETE	1.1 TITLE		Change Addition	
NAME	125 STARR STREET		1.2 NAME			
STREET ADDRESS	OAKLAND FL		1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	D		1.4 CITY-ST-ZIP			
NAME	LUMMUS, CATHERINE S.	L DELETE	2.1 TITLE		Change Addition	
STREET ADDRESS	125 STARR STREET		2.2 NAME			
CITY-ST-ZIP	OAKLAND FL		2.3 STREET ADDRESS			
TITLE	-	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE			
NAME		L"] DEFETE	3.2 NAME		Change Addition	
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	'	Change C Addition	
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			

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

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.

__ DELETE