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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 674909

(7)

LANIER ASSOCIATES, INC.

## FILED Apr 21 1998 8:00am Secretary of State

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Principal Pla	ace of Business	Mailing Address			I PODIFO DIVIN NEDIT BIDIN NUKT DERIM NUKT BIDIN BIDIN BIDIN DIDIN DIDIN DIDIN DIDIN DIDIN DIDIN POPR
·	AKE MARY BLVD	3599-C W. LAKE MARY B	IVD		
LAKE MARY		LAKE MARY FL 32746			DO NOT WRITE IN THIS SPACE
US		US			3. Date Incorporated or Qualified
					06/25/1980
2. Principal	Place of Business	2a. Mailing Address			4, FEI Number Applied For
21	26				59-2040828 Not Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & St 23	alo	City & State			6. Election Campaign Financing \$5.00 May Be  Trust Fund Contribution ☐ Added to Fees
Zip	Country	<b>28</b> ]	Count	ry	
24	25	<del> </del>	30	•	Personal Property Tax due June 30. Yes No
	g. Name and Address of Current				10. Name and Address of New Registered Agent
	ANIER, GENE		8	1 1	Name
	599-C W. LAKE MARY BLVD		8	<b>2</b> S	Street Address (P.O. Box Number is Not Acceptable)
U	NKE MARY FL 32748		Ļ		
			8	3	
			8	4 C	City 85 Zip Code
					e-named corporation submits this statement for the purpose of changing its registered to the corporation's board of directors. I hereby accept the appointment as registered is
SIGNATURE	Stgnature: typed or printed name of registered agent OFFICERS AND	DIRECTORS	13.		ent signature required when reinstainig)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CPS	☐ DELETE	1.1 TITLE		Change Addition
NAME	LANIER, GENE		1.2 NAMI	F	
STREET ADORESS					ADDRESS
CITY-ST-ZIP	LAKE MARY FL	DELETE	1.4 CITY		T-ZIP Change Addition
TITLE NAME	CAMPBELL, DOROTHY	□ bettie	2.1 TITLE 2.2 NAMI		ADDRESS President Dorothy
STREET ADDRESS	A				ADDRESS Lanter, porothy
City-St-ZiP	ORMOND BEACH FL		2 4 CITY		
TITLE		DELETE	3 1 TITLE		☐ Change ☐ Additio
NAME			32 NAMI	E	
STREET ADDRESS	s		33 STRE	ET ADO	ADDRESS
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAM		
STREET ADDRESS	5				ADDRESS
CITY-ST-ZIP		Libriere	4.4 CITY		
TITLE		☐ DELETE	5.1 TIFLE		Change Additio
NAME			5.2 NAME		IDDIVIO
STREET ADDRESS					ADDRESS
CITY-ST-ZIP TITLE	<del></del>	DELETE	5.4 CITY - 6.1 TITLE		T-ZIP Change Additio
NAME		E Deceile	6.2 NAME		Containings 1 Addition
STREET ADDRESS					ADDRESS
CITY - ST - ZIP	1		6.4 CiTY		
	cortifu that the information emphasis with	this films does not qualify to			tion stated in Section 110 07(3)(i) Florida Statutes I further partity that the information

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 fruste 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:

4/15/98

407-328-0880