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Jan 25, 1999 8:00am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 837013

1. Corporation Name
LANDS INCORPORATED OF RHINELANDER

Principal Place of Business
5126 SO GALVIN TR
FLORAL CITY FL 34436-2107
US

Mailing Address
5126 SO GALVIN TR
FLORAL CITY FL 34436-2107
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/14/1976

4. FEI Number

39-1173030

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 owes the current year Intangible
Personal Property Tax.

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

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOX, FLORENCE B.
5126 SO GALVIN TR
FLORAL CITY FL 34436

81 Name

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

83

84 City

85 Zip Code
FL

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

TITLE PT ☐ DELETE

NAME FOX, FLORENCE B.
STREET ADDRESS 5126 SO GALVIN TR.
CITY-ST-ZIP FLORAL CITY FL

TITLE D ☐ DELETE

NAME FOX, FLORENCE B.
STREET ADDRESS 5126 SO GALVIN TR
CITY-ST-ZIP FLORAL CITY FL

TITLE SD ☐ DELETE

NAME MILLER, ROBERT G.
STREET ADDRESS 412 HIGHLAND
CITY-ST-ZIP WEST CHICAGO IL

TITLE VSD ☐ DELETE

NAME MILLER, ROBERT G.
STREET ADDRESS 412 HIGHLAND
CITY-ST-ZIP W CHICAGO IL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

34436

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

34436

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

60185

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

60185

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 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.

Florence B. Fox, PRES TREAS.

SIGNATURE

Jan 6, 1999

(352) 726-7054

Date

Daytime Phone #

CR2E034 (11/98)