

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90086 049 ***150.00

DOCUMENT # 844770

1. Corporation Name

LAN RON BUILDERS, INC.

Principal Place of Business

23232 PERALTA
109
LAGUNA HILLS CA 92653
US

Mailing Address

23232 PERALTA
109
LAGUNA HILLS CA 92653
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

PINE LAKES/G. SCOTT BROWN
10200 PINE LAKES BOULEVARD
NORTH FORT MYERS 33903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/06/1979

4. FEI Number

95-2819187

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

10. Name and Address of New Registered Agent

81 Name

G. SCOTT BROWN

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

5430 BAYSIDE BLVD

83

84 City

N. Ft MYERS

FL

85 Zip Code

33917

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

G. Scott Brown
Signature, typed or printed name of registered agent and title if applicable.

G. SCOTT BROWN, SECRETREAS
(NOTE: Registered Agent signature required when reinstating)

DATE

3/30/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
BROWN, GROVER CO JR
STREET ADDRESS 1121 EMERALD BAY
CITY-ST-ZIP LAGUNA BCH, CA 00000

TITLE ☐ DELETE

NAME V
BROWN, ROBERT D
STREET ADDRESS 5727 INVERNESS CIRCLE
CITY-ST-ZIP NO FT MYERS, FL 00000

TITLE ☐ DELETE

NAME STD
BROWN, G. SCOTT
STREET ADDRESS 27562 ESCUNA
CITY-ST-ZIP MISSION VIEJO CA

TITLE ☐ DELETE

NAME V
BROWN, STEPHEN A.
STREET ADDRESS 30171 HILLSIDE TERRACE
CITY-ST-ZIP SANJUAN CAPISTRANO CA

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

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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.

SIGNATURE

G. Scott Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SECRETREAS
(949) 583-1155

CR2E034 (11/98)