

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 31 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F24912

(0)

1. Corporation Name

321 SOUTH LAKE DRIVE CORP.

Principal Place of Business

Mailing Address

C/O MIKE S BUCKNER
1900 PHILLIPS PT W 777 S FLAGLER DR
WEST PALM BCH FL 33401-3198

C/O MIKE S BUCKNER
1900 PHILLIPS PT W 777 S FLAGLER DR
WEST PALM BCH FL 33401-3198

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

04/17/1981

04/07/1994

4. FEI Number

Applied For

59-2456423

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUCKNER, MIKE S
1900 PHILLIPS PT W
777 S FLAGLER DR
W PALM BCH 33401-3198

81 Name

82 Street 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 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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

P
BARBER, JOYCE
309 PERUVIAN AVE
PALM BEACH FL

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

P
BARBER, JOYCE
260 Southland Road
Palm Beach, FL 33480

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY - ST - ZIP

SIGNATURE:

JOYCE BARBER, PRESIDENT

7/21/95

(407) 844-3480