Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90134 028 ***150.00

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

DOCUMENT # F32426

1. Corporation Name

LANTANA PROPERTY SERVICES, INC.

Principal Place	of Business	M	ailing Address					e imatimit eine tiete italt armis eit	FIN AIRL AIRLE	9581) 010)1 3 1811 (
670 N. COURTENAY PKWY 17B MERRITT ISLAND FL 32954 US P.O. BOX 540941 MERRITT ISLAND FL 32954-09 US					141			DO NOT WRI	ΓΕ IN THIS	S SPACE	
US							3. Date incorporated or Qualifed 04/27/1981				
2. Principal Place of Business 2a. Mailing Address								, FEI Number		Ap	plied For
21 26							1	59-2856699		No	t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5	Certificate of Status Desired		\$8.75 A	
City & State			City & State			6	Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	- 1	
Zip	Country		Zip	Cou	intry		8	This corporation owes the cum	ent year In		_
24	25 29 3			30	0			Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Curren	t Regis	stered Agent				10). Name and Address of New F	Registered	Agent	
					81	Name					1
LUCAS, RONALD J.					82	Street A	Address (P.O. Box Number is Not Accepta	hle)		
429 WATTS WAY					~	Street Address (F.O. Box Number is Not Acceptable)					
COCOA BEACH FL 32931					83						
					-	- City				OE Zin I	Code
					84	City			FL	_ 85 Zip (
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.											registered gistered
SIGNATURE	Signature, typed or printed name of registered agen	t and title	if applicable. (NOTE:	Registered	Agen	t signature rec	quired wher	reinstating)	DATE		
12.	OFFICERS AN	D DIRE	CTORS	13.				ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTO	
TITLE	S		☐ DELETE	1.1 TI	TLE	Ī				☐ Change	☐ Addition
NAME	LUCAS, RONALD J.			1.2 N	ME	\					Į.
STREET ADDRESS	670 N COURTENAY PKWY. 17	В		1.3 8	TREET	ADDRESS					ļ
CITY-ST-ZIP	MERRITT ISLAND FL 32954			1.4 CI	T <u>Y-S1</u>	-ZIP					
TITLE	PD		☐ DELETE	2.1 TI	πE	-				Change	☐ Addition
NAME	COXALL, JOHN			2.2 N	AME						
STREET ADDRESS	670 N. COURTENAY PKWY 17	В		2.3 \$	TREET	ADDRESS					1
CITY-ST-ZIP	MERRITT ISLAND FL			2.40	ΠY-S	T- ZIP		<u> </u>			
TITLE	,		☐ DELETE	3,1 TI	TLE					Change	Addition
NAME				3.2 N	AME	1					
STREET ADDRESS				3.3 S	TREET	ADDRESS					}
CITY-ST-ZIP				3.4. C	ary-s	T-ZIP					
TITLE			☐ DELETE	4.1 TI	TLE					Change	Addition
NAME				4.2 N	AME	İ					
STREET ADDRESS			,	4.3 S	TREET	ADDRESS					
CITY-\$T-ZIP	•			4.4 C	ITY-SI	r-ZIP			713		
TILE			☐ DELETE	5.1 TI	TLE			· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition
NAME				5.2 N	AME						
STREET ADDRESS				5.3 S	TREET	ADDRESS					
CiTY-ST-ZIP				5.4 C	ITY-SI	r-ZIP					
TITLE			☐ DELETE	6.1 TI	TLE			·		☐ Change	Addition
NAME]				6.2 N	AME						
STREET ADDRESS				6.3 S	TREET	ADDRESS					1

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 suppliemental 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 attachagent with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR