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

**FILED** Jun 04 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F33172 (0)LANIER RANCH & GROVE, INC. Principal Place of Business Mailing Address **WANTER RANCH & GROVE INC** 6894 LANIER RD ZOLFO SPRINGS FL 33890 6894 LANIER RD DO NOT WRITE IN THIS SPACE ZOLFO SPRINGS FL 33890 3. Date Incorporated or Qualified <u>05/01/1981</u> 2, Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For Not Applicable 21 26 59-2217991 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 HARD 29

9. Name and Address of Current Registered Agent Yes 24 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 Name LANIER, E.M. 6894 LANIER RD 82 Street Address (P.O. Box Number is Not Acceptable) ZOLFO SPRINGS FL 33890 83 City 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 (NOTE Registered Agent signature required when reinstating) Signature: typical or printed name of registers diagent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ST 1.1 TITLE Change Addition TITLE NAME LANIER, FLORENCE 1.2 NAME 6894 LANIER RD STREET ADDRESS 1.3 STREET ADDRESS ZOLFO SPRINGS, FL 33890 CITY-ST-ZIP 1.4 CITY - S1 - ZIP DELETE ... Change Addition TITLE 2.1 TITLE LANIER, E M NAME 2.2 NAME **6894 LANIER RD** STREET ADDRESS 2.3 STREET ADDRESS **ZO**LFO SPRINGS, FL 33890 CITY-ST-ZIP 2 4 City-St-ZiP DELETE Change Addition TITLE 3.1 TITLE LANIER, R. ARNOLD NAME 3.2 NAME **6775 LANIER RD** STREET ADDRESS 3.3 STREET ADDRESS **ZOLFO SPRINGS FL** 3.4. CITY - ST - 7IP CITY-ST-ZIF DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE

6.4 CITY - ST- ZIP CITY - ST - ZIP 14. Thereby 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 of 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 charged, our applicability with an address.

**5.2 NAME** 

6.1 TITLE

6.2 NAME

DELETE

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

54 CITY-ST-ZIP

NAME

TIFLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

Addition