

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
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90088 041 ***158.75

DOCUMENT # F92000000172

1. Corporation Name

LANDDESIGN, INC.

Principal Place of Business

1701 EAST BLVD
CHARLOTTE NC 28203
US

Mailing Address

P.O. BOX 11938
CHARLOTTE NC 28220-1938

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1992

4. FEI Number

56-1304246

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

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KUHLMAN, KEITH
777 SOUTH HARBOURISLAND BLVD
SUITE 980
TAMPA FL 33602

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT ☐ DELETE
NAME BEST, LARRY W
STREET ADDRESS YOUNGS ROAD
CITY-ST-ZIP SOUTHERN PINES NC 28237

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME Taylor, David R.
1.3 STREET ADDRESS 21201 Senlac Lane
1.4 CITY-ST-ZIP Davidson, NC 28036

TITLE VS ☐ DELETE
NAME DAVIS, BRADLEY W
STREET ADDRESS 2720 PICARDY PLACE
CITY-ST-ZIP CHARLOTTE NC 28209

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME CROWLEY, PETER R
STREET ADDRESS 155 WEST NELSON AVENUE
CITY-ST-ZIP ALEXANDRIA VA

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME KISER, DWIGHT
STREET ADDRESS 1816 BAY ST
CITY-ST-ZIP CHARLOTTE NC

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Kiser, Dwight
4.3 STREET ADDRESS 103 Century Oak Drive
4.4 CITY-ST-ZIP Franklin, TN 37069

TITLE V ☐ DELETE
NAME SCHWEITZER, EDWARD
STREET ADDRESS 5227 CRESSINGHAM COURT
CITY-ST-ZIP CHARLOTTE NC

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME JORDAN, STEPHEN M
STREET ADDRESS 8 WEST WYATT AVE
CITY-ST-ZIP ALEXANDRIA VA

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/28/99 (910) 692-2788

CR2E034 (1/98)