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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F94000001015 (6)

1. Corporation Name
LEHIGH ACRES/FUNDING G.P., INC.

Principal Place of Business
3525 PIEDMONT ROAD, N.E.
7 PIEDMONT CENTER, STE. 150
ATLANTA GA 30305

Mailing Address
3525 PIEDMONT ROAD, N.E.
7 PIEDMONT CENTER, STE. 150
ATLANTA GA 30305-1530

3. Date Incorporated or Qualified 03/01/1994
3a. Date of Last Report 04/30/1996

4. FEI Number 58-2093558
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

SCHEU, WILLIAM E ESQ.
200 WEST FORSYTH ST., STE. 1600
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

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 of person or persons providing name or registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME CP
GIPSON, JOHN H
STREET ADDRESS 3525 PIEDMONT RD., NE, 7 PIEDMONT CNTR 150
CITY-ST-ZIP ATLANTA GA 30305

TITLE ☐ DELETE
NAME D
SEVERINO, SUSAN
STREET ADDRESS 3405 PIEDMONT RD., NE, 7 PIEDMONT CNTR 450
CITY-ST-ZIP ATLANTA GA 30305

TITLE ☒ DELETE
NAME VS
GIPSON, SAMUEL L
STREET ADDRESS 3525 PIEDMONT RD., NE, 4 PIEDMONT CNTR 120
CITY-ST-ZIP ATLANTA GA 30305

TITLE ☐ DELETE
NAME AS
SIEGEL, MARSHALL E
STREET ADDRESS 3405 PIEDMONT RD., NE, STE. 450
CITY-ST-ZIP ATLANTA GA 30305

TITLE ☒ DELETE
NAME T
LEACH, SHEILA
STREET ADDRESS 3525 PIEDMONT RD., NE, STE. 150
CITY-ST-ZIP ATLANTA GA 30305

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 do 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 "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 on; 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/97 404 231 621

Date

Daytime Phone #

CR2E034 (9/96)