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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F95000002239 (0) DOCUMENT #
1. Corporation Name

LZB FLORIDA REALTY, INC.

Principal Place of Business	Mailing Address	
1248 N. TELEGRAPH RD. MONROE MI 48162 US	1248 N. TELEGRAPH RD. MONROE MI 48261	
2. Principal Place of Business	28. Mailing Address	
Suite, Apt. #, etc.	26   Suite. Apt. #, etc.	

**FILED** May 04 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/08/1995 4. FEI Number Applied For 38-3235942 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country  $Z_{(0)}$ Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CT CORPORATION SYSTEM 81 Name 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 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 naesc of registered agent and title diapple able. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change X Addition P/D KNABUSCH, CHARLES T NAME 1.2 NAME Kiser, Genald L 1505 Hollywood Dr. 13965 BRIDGE ST STREET ADDRESS 1.3 STREET ADDRESS MONROE MI Morroe MI CITY-ST-ZIP 1.4 City-St-ZiP 48169 TITLE DELETE 21 TITLE Change Addition JACKSON, F. H NAME **2.2 NAME** 17757 PARKE LANE STREET ADDRESS 2.3 STREET ADDRESS **GROSSE ILE MI 48138** CITY-ST-ZIP 2. 4 CITY - ST - ZIP STD ☐ DELETE TITLE 3.1 10118 SID X Change ☐ Addition HARDY, GENE M Hardy Gene m 550 Spring Lake Point NAME **3.2 NAME** 7074 DUNSTAN'S LANE STREET ADDRESS 3.3 STREET ADDRESS **TOLEDO OH 43617** HOLLAND WH H3528 CITY-ST-ZIP 3.4. CITY-ST-ZIP ASTC DELETE TITLE 4.1 TITLE Change Addition KLARR, JAMES P NAME 4.2 NAME 29266 EAST RIVER ROAD STREET ADDRESS 4.3 STREET ADDRESS **GROSSE ILE MI 48101** CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition BARBER, JOHN W NAME 5.2 NAME 7612 NOTTINGHAM STREET ADDRESS 5.3 STREET ADDRESS LAMBERTVILLE MI 48144 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change 6.1 TITLE Addition WEAVER, JOHN F NAME 6.2 NAME 305 W. ELM AVENUE STREET ADDRESS 6.3 STREFT ADDRESS MONROE MI 48161 CITY-ST-ZIP 6.4 CITY-S1-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 or the receiver or trustoe 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

ASSISTANT SECRETARY