

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F97000000238 (2)

1. Corporation Name

LANDTECH SUPPORT SERVICES OF THE SOUTHWEST, INC.

Principal Place of Business

3402 SW CATSKILL DR  
PORT ST LUCIE FL 34953

Mailing Address

3402 SW CATSKILL DR  
PORT ST LUCIE FL 34953



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1997

4. FEI Number

75-2524879

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 361 SW MAJESTIC TER

Suite, Apt. #, etc.

22

City & State  
23 PORT ST LUCIE, FL

Zip Country  
24 34984 25 USA

2a. Mailing Address

26 361 SW MAJESTIC TER

Suite, Apt. #, etc.

27

City & State  
28 PORT ST LUCIE, FL

Zip Country  
29 34984 30 USA

9. Name and Address of Current Registered Agent

BELL, DWIGHT W  
3402 SW CATSKILL DR  
PORT ST LUCIE FL 34953

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

361 SW MAJESTIC TERRACE

83

84 City PORT ST LUCIE

FL

85 Zip Code 34984

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 *DWIGHT W. BELL*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/31/98

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE

NAME BELL, DWIGHT W  
STREET ADDRESS 3402 SW CATSKILL DR  
CITY-ST-ZIP PORT ST LUCIE FL 34953

TITLE VD ☐ DELETE

NAME BELL, L. ANGELIA  
STREET ADDRESS 3402 SW CATSKILL DR  
CITY-ST-ZIP PORT ST LUCIE FL 34953

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

361 SW MAJESTIC TERRACE  
PORT ST LUCIE, FL 34984

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

361 SW MAJESTIC TERRACE  
PORT ST LUCIE, FL 34984

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 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.

SIGNATURE *DWIGHT W. BELL*

8/31/98

361 SW MAJESTIC TERRACE

CR2E034 (5/98)