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May 06, 1999 8:00 am
Secretary of State

05-06-1999 90125 049 ***550.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000001359

1. Corporation Name

LANDA MANAGEMENT SYSTEMS CORPORATION

Principal Place of Business

1072 MARAUDER STREET, STE A
CHICO CA 95973

Mailing Address

1072 MARAUDER STREET, STE A
CHICO CA 95973

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1998

4. FEI Number

94-2817962

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CEOD
NAME LAND, BRYAN
STREET ADDRESS 35 COVELL PARK DRIVE
CITY-ST-ZIP CHIC CA

TITLE SD
NAME LANG, GILBERT H
STREET ADDRESS 7920 MORNINGSIDE DRIVE
CITY-ST-ZIP LOOMIS CA

TITLE T
NAME KAY, STEPHEN P
STREET ADDRESS 2381 RITCHIE COURT
CITY-ST-ZIP CHICO CA

TITLE D
NAME STRATTON, ROGER
STREET ADDRESS 7000 ALAMEDA DRIVE
CITY-ST-ZIP RANCHO MURIETTA CA

TITLE D
NAME Jason Rosenbluth, MD
STREET ADDRESS 1072 Marauder Street Ste, A
CITY-ST-ZIP Chico, CA 95973

TITLE D
NAME Howard Cox
STREET ADDRESS 1072 Marauder Street, STE A
CITY-ST-ZIP Chico, CA 95973

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CTOD
1.2 NAME Lang, Bryan
1.3 STREET ADDRESS 35 Covell Park Drive
1.4 CITY-ST-ZIP Chico, CA

2.1 TITLE CEO/COOSD
2.2 NAME Kay, Stephen
2.3 STREET ADDRESS 14540 Camaren Park
2.4 CITY-ST-ZIP Chico, CA 95973

3.1 TITLE CEOD
3.2 NAME Santa Cattarina, Eugene
3.3 STREET ADDRESS 540 Chestnut Rose Lane
3.4 CITY-ST-ZIP Atlanta, GA 30327

4.1 TITLE D
4.2 NAME Jerome Grossman, MD
4.3 STREET ADDRESS 1072 Marauder Street Ste, A
4.4 CITY-ST-ZIP Chico, CA 95973

5.1 TITLE D
5.2 NAME Tom Stephenson
5.3 STREET ADDRESS 1072 Marauder Street Ste A
5.4 CITY-ST-ZIP Chico, CA 95973

6.1 TITLE
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 Steve Kay

April 28, 1999

(530) 891-0853

CR2E034 (11/98)