SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** G11448 1 1. Corporation Name

DEV-LAND, INC.

## **FILED** Sep 01, 1999 8:00 am Secretary of State

09-01-1999 90025 029 \*\*\*434.92 09-01-1999 90025 030 \*\*\*115.08



Principal Place o	n answess	Mailing Address				
2100 MCGREGOR		2100 MCGREGOR BOULEV	ARD			
FT. MYERS FL 3:	i390 <del>1</del>	FT. MYERS FL 33901		DO NOT WRITE IN THIS	SDACE	
					SFACE	
				3. Date Incorporated or Qualified 12/02/1982		
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	4105 Lee Boulevard	26 Post Office Box	6152	59-2392685	Not Applicable	
Suite, Apt. #,		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City. & State		6. Election Campaign Financing	\$5.00 May Be	
23	Lehigh Acres, FL	28 Fort Myers, FL		Trust Fund Contribution	Added to Fees	
Zip	Country	Zìp	Country	8. This corporation owes the current year	7 😾	
24 339	971 25 Lee	29 33911	30 Lee	Intangible Personal Property.	Yes No	
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registered	Agent	
COICE	CITIL ALLANET CA		81 Name	+ []];	l	
GRIFFITH, ALLAN T PA				Robert Flliott  82 Street Address (P.O. Box Number is Not Acceptable)		
2100 MCGREGOR BOULEVARD			1 1	4105 Lee Boulevard		
FI. M	IYERS FL 33901		83			
			84 City . •		85 Zip Code	
			°°   ~Lehi	gh Acres, FL	85 Zin Code 33971	
11. Pursuant to	the provisions of sections 607.050	2 and 607.1508, Florida Statutes	the above-named co	moration submits this statement for the purpose of ch	anging its registered	
office or rec	gistered agent, or both, in the State of familia with, and accept the oblig	e of Florida. Such change was at	ithorized by the corpor	ration's board of directors. I hereby accept the appoin	ntment as registered	
	Transition with, and accept the delice	Zilons of, section do7.0303, 7107	ida Statutes.	8/25/99	)	
SIGNATURE	gnature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered Agent signature	required when reinstating) DATE		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	PVST	X DELETE	1.1 TITLE	PVST	VI Change Addition	
NAME	ELLIOT, ROBERT T	*		Robert T. Elliott		
STREET ADDRESS	9339 LENNEX LANE, SW				}	
	FT. MYERS FL		4 4 OFF AT TIO	4105 Lee Boulevard		
TITLE		DELETE	2.1 TITLE	_ehigh Acnes, FL 33971	Change Addition	
NAME			2.2 NAME		_	
STREET ADDRESS			2.3 STREET ADDRESS		Ì	
			2,4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	3.1 TITLE		Change Addition	
-NAME	ماليات الشاك الأيسان الميساسيين	UELEIC	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
			3.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		Change Addition	
		( DELETE	4.2 NAME		Shange Addition	
NAME			4.3 STREET ADDRESS			
OTDEET ADODESS			4.9 OTHEET ADDRESS			
STREET ADDRESS			A A CITY OF THE			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change Addition	
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addition	
CITY-ST-ZIP TITLE NAME		DELETE	5.1 TITLE 5.2 NAME		Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	section 119.07(3)(i), Florida Statutes. I further certify I	Change Addition	

in Block 12 or Block 13 if changed, or op an attachment with an address. President

SIGNATURE: