**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:58

DOCUMENT # **G41498** **(8)**

1. Corporation Name
**LANTANA CASCADES & FMO ASSOC., INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 3323 W. MAYAGUANA LANE<br>LANTANA FL 33462 | 3323 W. MAYAGUANA LANE<br>LANTANA FL 33462 |

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/18/1983
3a. Date of Last Report: 04/20/1994

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 | 26 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 | City & State 28 |
| Zip 24 / Country 25 | Zip 29 / Country 30 |

4. FEI Number: 59-2767438 ☐ 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

| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
|---|---|
| HAINES, NORMA J<br>3323 W. MAYAGUANA LANE<br>LANTANA FL 33462 | 81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | P | 1.1 TITLE | ☐ Change ☐ Addition |
| NAME | HARRIS, JOHN | 1.2 NAME | |
| STREET ADDRESS | 3294 S. LAKE CASCADE | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | LANTANA FL 33462 | 1.4 CITY-ST-ZIP | |
| TITLE | V | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | SAVAGE, HELENA | 2.2 NAME | |
| STREET ADDRESS | 3322 CAT CAY | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | LANTANA FL 33462 | 2.4 CITY-ST-ZIP | |
| TITLE | ST | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | HAINES, NORMA | 3.2 NAME | |
| STREET ADDRESS | 3323 W MAYAGUANA | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | LANTANA FL 33462 | 3.4 CITY-ST-ZIP | |
| TITLE | D | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | CHIODINI, NANCY | 4.2 NAME | |
| STREET ADDRESS | 6377 BULA ALEX CAY | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | LANTANA FL 33462 | 4.4 CITY-ST-ZIP | |
| TITLE | D | 5.1 TITLE D | ☒ Change ☐ Addition |
| NAME | LAVALLEE, GEORGETTE | 5.2 NAME Raymond Poirier | |
| STREET ADDRESS | 6446 BULA ALEX | 5.3 STREET ADDRESS 6364 Jewelfish Cay | |
| CITY-ST-ZIP | LANTANA FL 33462 | 5.4 CITY-ST-ZIP Lantana, FL 33462 | |
| TITLE | D | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | BAAR, BETTY | 6.2 NAME | |
| STREET ADDRESS | 3282 S. LAKE CASCADE | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | LANTANA FL 33462 | 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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:** Norma Haines — NORMA Haines 3/22/95 (407) 965-5146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #
AS per Conversation w/ Norma Haines on 3/31/95

CR71A00 CP