## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # H64197

1. Corporation Name

(7)

LANDMARK COMMUNITIES, INC.

			<del></del>			l 1881 Gabia Gagar Galla (1881) bildi	
rincipal Place o	f Business	Mailing Address					
	SPRINGS DRIVE	414 BERMUDA SPGINGS DRIVE FT. LAUDERDALE FL 33326					
FT. LAUDERDALE FL 33326 US		US		3. Date Incorporated or Qualified	3a. Date of Last F	Report	
					06/19/1985	04/11/18	95
Principal Plac	e of Business	2a. Mailing Address		~	4. FEI Number		Applied For
13300	MDIPO GOLLS BD	26 133W INDI	M R	CXKS (KD	59-2549540		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5, Certificate of Status Desired	1 1	5 Additional Required	
4 200	1	27 <b>7</b> 504 City & State			6. Election Campaign Financing	\$5.0	00 May Be
City & State	O EL	28 LARGO 1	FL		Trust Fund Contribution	1 1	ed to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for i		199.032,
3464	1 25 PINELLAS	29 34644	30 8([	SETTA?		No	
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New F	registered Agent	
				$\sim$	PONTE C. SIMS	<b>&gt;</b>	
SIMS, MO					ddress (P.O. Box Number is Not Acceptable)		
	49 TERRACE			13300	INDIAN BOOKS	400 . GC	
COCONU	JT CREEK FL 33063						
				84 City	•	FL 85 2	Ip Code
	11	and 607 1509 Florida Statut	se the abo	LIARS	ration submits this statement for the pur		registered off
or registere	d agent or both, in the State of Floric	la. Synh change was authoriz	ed by the o	corporation's boar	ration submits this statement for the puring of directors. I hereby accept the app	pointment as registere	d agent. I am
famili <del>ar witt</del>	, and accept the obligations of Secti	on \$67.0505, Florida Statutes	i.			4/15/5	6
	# 1/1/20 A March 1					,,,,,,	
	id at the broad or or other name of registers, agent	and title if applicable (NC	TE Registered	Agent signature require	ed when reinstaling)	DAT	
SNATURE	id us a typed or printed name of registers agent OFFICERS ANI		TE Registered	Agent signature require	ed wher: reinstating) ADDITIONS/CHANGES TO OFF		
GNATURE /						DAT FICERS AND DIRECT Change	
SNATURE LE	OFFICERS AND	D DIRECTORS	13.	ITLE			
GNATURE L. LE ME	PD OFFICERS AND	D DIRECTORS	13. 1 1 T 1.2 N	ITLE			
GNATURE  LE  ME  REET ADDRESS	PD BROWN, JARED D.	DIRECTORS DELETE	13. 1 17 1.2 N	ITLE AME		☐ Change	Additio
GNATURE  LE  ME  REET ADDRESS  IY-ST-ZIP	PD BROWN, JARED D. 121 N. OSCEOLA AVENUE CLEARWATER FL VD	D DIRECTORS	13. 1 17 1 2 N 1 3 S 1 4 C 2 1 T	ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE			Additio
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GNATURE  LE ME ME METADDRESS Y-ST-ZIP LE ME ME ME ME ME REETADDRESS	PD BROWN, JARED D. 121 N. OSCEOLA AVENUE CLEARWATER FL VD SIMS, MONTE C. 121 N. OSCEOLA AVE. CLEARWATER FL	D DIRECTORS  DELETE	13. 1 17 12 N. 13 S 14 C 2 17 22 N 23 S 24 C	ITLE  AME  IREET ADDRESS  ITY-ST-ZIP  ITLE  AME  ITREET ADDRESS  ITY-ST-ZIP		Change	Additio
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GNATURE  LE  ME  GET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  ME  REET ADDRESS  IY-ST-ZIP	PD BROWN, JARED D. 121 N. OSCEOLA AVENUE CLEARWATER FL VD SIMS, MONTE C. 121 N. OSCEOLA AVE. CLEARWATER FL TD BROWN, ROBERT G.	D DIRECTORS  DELETE  DELETE	13. 11T 12N 13S 14C 21T 22N 23S 24C 311 32N 33S 34C	ITLE  AME  IREET ADDRESS  ITY-ST-ZIP  ITLE  AME  IREET ADDRESS  ITY-ST-ZIP  ITLE  AME  ITHER		Change	Additio
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GNATURE  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP	PD BROWN, JARED D. 121 N. OSCEOLA AVENUE CLEARWATER FL VD SIMS, MONTE C. 121 N. OSCEOLA AVE. CLEARWATER FL TD BROWN, ROBERT G. 121 N. OSCEOLA AVE S-30	DELETE  DELETE  DELETE	13. 117 12 N. 138 14C 217 22 N. 238 24C 311 32 N. 338 34C 4.1 42 N. 438 44( 51 527 538 540	ITLE  AME  IREET ADDRESS  ITY-ST-ZIP  ITLE  AME  ITREEI ADDRESS  ITY-ST-ZIP  ITLE  AME  SIREET ADDRESS  ITY-ST-ZIP  ITLE  ITLE		Change	Addition  Addition  Addition  Addition  Addition
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MED NAME OF SIGNING OFFICER OR DIRECTOR