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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J23325
1. Corporation Name
CONDOR LAND HOLDINGS, INC.

(0)



Principal Place of Business

2935 NE 58TH AVE
SUITE 4
OCALA FL 34471
US

Mailing Address

P. O. BOX 71042 N/A
OCALA FL 34471-0042
US

2. Principal Place of Business

21 2935 SE 58th Avenue
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

FUNK, RAINER D.
2935 SE 58TH AVE SUITE 4
OCALA FL 34471

SE

3. Date Incorporated or Qualified

07/10/1986

3a. Date of Last Report

07/09/1996

4. FEI Number

59-2701891

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

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 fee (if applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDS ☐ DELETE

NAME KLEIN, WERNER

STREET ADDRESS HAKENSTR 78

CITY-ST-ZIP NORDHORN GE

TITLE VT ☐ DELETE

NAME FUNK, RAINER D.

STREET ADDRESS 6130 S.E. 20TH STREET

CITY-ST-ZIP OCALA FL

TITLE D ☐ DELETE

NAME SCHEUERMANN, FRIEDRICH

STREET ADDRESS WOERWORLDWEG 13/1

CITY-ST-ZIP REUTLINGEN GE

TITLE D ☐ DELETE

NAME ARNOLD, JOHANN

STREET ADDRESS DOTTINGER STR 4

CITY-ST-ZIP MUENSINGEN GE

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

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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

14. I do 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 or changed, or on an attachment with an address.

SIGNATURE

APR 25 1997

352-624-7352

CR2E034 (9/96)