FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 06 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

(9)

THE NOR-LAND SOUTH COMPANY, INC.

Principal Place of Business		Mailing Address		4 194(1(4 81)) 198)) 88181 1189) 1818(119) 81811	Bidir Brası Arkii Bidir Arası 1921
3633-26TH STREET WEST		505 MIDDLESEX TURN	#13		
BRADENTON FL 34205-3503		BILLERICA MA 01821		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	10 01 700
				04/21/1987	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		04-2985310	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		\$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		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	ni negisterea Agent	81 Name	10. Name and Address of New Register	ea Agent
	al, thomas m		Name		
2744-A HIDDEN LAKE BLVD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SA	rasota fl 34237		-		·
			83		
			84 City		85 Zip Code
				•	L 63 Zip Code
11. Pursuant office or r	10 the provisions of Sections 607.050 r egiste red agent, or both, in the State	02 and 607.1508, Florida Statu e of Horida, Such change was	tes, the above-named corp authorized by the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the	e of changing its registered appointment as registered
agent. Fa	im familiar with, and accept the oblig	jations of, Section 607. 0505 , Fl	orida Statutes.	, , ,	,,
SIGNATURE					
12,	Signature, typed or profest name of regularist asp	AD DIRECTORS	15: Registered Agent signature requir	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1.1 TITLE	ADDITIONAL OF TAKEN	Change Addition
NAME	LEARSON, JOHN R.		1.2 NAME		- • -
STREET ADDRESS	18 BERKELEY DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CHELMSFORD MA		1.4 CITY - ST - ZIP		
TITLE	STD	DELETE	2.1 TITLE		Change Addition
NAME	TURNER, GEORGE		2.2 NAME		
STREET ADDRESS	OLD COUNTRY PATH		2 3 STREET ADDRESS		
CITY-ST-ZIP	WAYLAND MA		2. 4 CITY - S1 - ZIP		
TITLE	V	DELETE	3.1 TITUE		Change Addition
NAME	TUMELTY, GEORGE		3.2 NAME		
STREET ADDRESS	2749C HIDDEN LAKE BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		ļ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	•		6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP 14. Thereby 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 innual 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 employered 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 attackneys with an address.