

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90252 020 \*\*\*150.00

**DOCUMENT # J76925**

1. Entity Name  
**LANDCO DEVELOPMENT CORPORATION**



Principal Place of Business  
**395 COMMERCIAL CT  
STE A  
VENICE, FL 34292 US**

Mailing Address  
**395 COMMERCIAL CT  
STE A  
VENICE, FL 34292 US**



2. Principal Place of Business  
**333 S. Tamiami Trail  
Suite, Apt. #, etc.  
Suite 101**

3. Mailing Address  
**333 S. Tamiami Trail  
Suite, Apt. #, etc.  
Suite 101**

01072004 Chg-P CR2E034 (10/03)

City & State  
**Venice, FL**

City & State  
**Venice, FL**

4. FEI Number  
**59-2811756**

Applied For  
Not Applicable

Zip  
**34285**

Country

Zip  
**34285**

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**MILLER, MICHAEL W.  
395 COMMERCIAL CT  
STE A  
VENICE, FL 34292**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE PD ☐ Delete  
NAME MILLER, MICHAEL W.  
STREET ADDRESS 395 COMMERCIAL CT, STE A  
CITY-ST-ZIP VENICE, FL 34292

TITLE VSD ☐ Delete  
NAME PARISH, JAYNE E.  
STREET ADDRESS 395 COMMERCIAL CT, STE A  
CITY-ST-ZIP VENICE, FL 34292

TITLE VPD ☐ Delete  
NAME MILLER, T D  
STREET ADDRESS 395 COMMERCIAL CT, STE A  
CITY-ST-ZIP VENICE, FL 34292

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE PD - Miller, Michael W. ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 333 S. Tamiami Trail, Suite 101  
CITY-ST-ZIP Venice, FL 34285

TITLE VSD - Parrish, Jayne E. ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 333 S. Tamiami Trail, Suite 101  
CITY-ST-ZIP Venice, FL 34285

TITLE VPD - Miller, T.D. ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 333 S. Tamiami Trail, Suite 101  
CITY-ST-ZIP Venice, FL 34285

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04

Date

941-441-1380

Daytime Phone #