

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

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Northrup Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 96 JUN -7 AM 10:54	
DOCUMENT # K76290 (1) 1. Corporation Name LAKE MARIAN LANDING, INC.					
Principal Place of Business % RONALD SALES 1551 FORUM PLACE, SUITE 300F WEST PALM BEACH FL 33401			Mailing Address % RONALD SALES 1551 FORUM PLACE, SUITE 300F WEST PALM BEACH FL 33401		
DO NOT WRITE IN THIS SPACE.					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 22200 State Rd. 60		2a P. O. Box 2925		03/29/1989	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. Date of Last Report	
22		27		04/05/1994	
City & State		City & State		4. FBI Number	
23 Vero Beach, Florida		28 Vero Beach, Florida		59-2941738	
Zip		Zip		Applied For	
24 32966		29 32961		Not Applicable	
Country		Country		5. Certificate of Status Desired	
25		30		☐ \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
SALES, RONALD 1551 FORUM PLACE SUITE 300F WEST PALM BEACH FL 33401		81 Name William M. Cobb			
		82 Street Address (P.O. Box Number is Not Acceptable) 22200 State Road 60			
		83			
		84 City Vero Beach FL 85 Zip Code 32966			
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 <i>William M Cobb</i> DATE <i>5/30/95</i> (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when installing)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD		1.1 TITLE	☐ Change ☐ Addition	
NAME	COBB, WILLIAM M.		1.2 NAME		
STREET ADDRESS	P.O. BOX 2925 N/A		1.3 STREET ADDRESS		
CITY - ST - ZIP	VERO BEACH FL		1.4 CITY - ST - ZIP		
TITLE	SD		2.1 TITLE	☒ Change ☐ Addition	
NAME	SMITH, DENNIS L.		2.2 NAME	Janet Cobb	
STREET ADDRESS	120 130TH AVENUE		2.3 STREET ADDRESS	22200 State Road 60	
CITY - ST - ZIP	VERO BEACH FL		2.4 CITY - ST - ZIP	Vero Beach, Florida 32966	
TITLE			3.1 TITLE	☐ Change ☐ Addition	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY - ST - ZIP		
TITLE			4.1 TITLE	☐ Change ☐ Addition	
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE			5.1 TITLE	☐ Change ☐ Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE			6.1 TITLE	☐ Change ☐ Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			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 110.07(3)(k), 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 both after I report with an address.					
SIGNATURE: <i>William M Cobb</i> DATE: <i>5/16/95</i> 407-569-4986 (Signature, typed or printed name of signing officer or director) (Date) (Optional Phone #)					