

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K81885 (1)

1. Corporation Name
LIN-ROL CORPORATION



Principal Place
% ROLAND
4496 WIND
FT MYERS
M/M Roland Eisenberg
14352-A Harbour Landings Drive
Gulf Harbour Ycht. & C.C.
Fort Myers, FL 33908

NEW
2-B ADDRESS

2. Principal Place of Business
2a. Mailing Address
21 Suite, Apt. #, **M/M Roland Eisenberg**
22 **14352-A Harbour Landings Drive**
City & State **Gulf Harbour Ycht. & C.C.**
23 **Fort Myers, FL 33908**
Zip

3. Date Incorporated or Qualified **04/17/1989** 3a. Date of Last Report **03/07/1995**
4. FEI Number **65-0112675** 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. 189.032,
Florida Statutes Yes ☒ No

9. Name and Address of Current Registered Agent
EISENBERG, ROLAND
4496 WINDJAMMER LN
2-B
FT MYERS FL 33919

10. Name and Address of New Registered Agent
81 Name **NEW ADDRESS**
82 Street **M/M Roland Eisenberg**
83 **14352-A Harbour Landings Drive**
84 City **Gulf Harbour Ycht. & C.C.**
Fort Myers, FL 33908

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EISENBERG, ROLAND	1.2 NAME	NEW ADDRESS
STREET ADDRESS	4496 WINDJAMMER LN, 2-B	1.3 STREET ADDRESS	M/M Roland Eisenberg
CITY-ST-ZIP	FT MYERS FL	1.4 CITY-ST-ZIP	14352-A Harbour Landings Drive
TITLE	D	2.1 TITLE	<input type="checkbox"/> Addition
NAME	EISENBERG, LINDA	2.2 NAME	Gulf Harbour Ycht. & C.C.
STREET ADDRESS	4496 WINDJAMMER LN, 2-B	2.3 STREET ADDRESS	Fort Myers, FL 33908
CITY-ST-ZIP	FT MYERS FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 119.07(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 in an attachment with an address.

SIGNATURE: *Linda Eisenberg, Director* **LINDA EISENBERG** 2/1/96 941-482-7599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)