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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

99 MAY 13 PM 12:14

DOCUMENT # L21918

1. Corporation Name LYNDOL, INCORPORATED

Principal Place of Business C/O JOHN LYNDOL WARREN, JR. 5300 S ORANGE AVE ORLANDO FL 32809

Mailing Address C/O JOHN LYNDOL WARREN, JR. 5300 S ORANGE AVE ORLANDO FL 32809



DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified 10/06/1989
4. FEI Number 59-2973197
5. Certificate of Status Desired
6. Election Campaign Financing
8. This corporation owes the current year's Intangible Personal Property Tax
10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30 g. Name and Address of Current Registered Agent

WARREN, JOHN LYNDOL, JR. 4200 INWOOD LANDING DR. ORLANDO FL 32812

81 Name 82 Street Address 83 84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 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 607.0509, Florida Statutes.

SIGNATURE

Handwritten signature of John Lyndol Warren, Jr.

5/12/99 DATE

12. OFFICERS AND DIRECTORS

Table with 4 columns: Title, Name, Street Address, City-St-Zip. Contains entries for Warren, John Lyndol, Jr. and Warren, Lisa A.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: Title, Name, Street Address, City-St-Zip. Includes handwritten numbers and a date stamp.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/99 407-859-1364

CR2E034 (11/98)