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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **L30122**

LANGLEY STABLES, INC.

## **FILED** Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90044 045 \*\*\*150.00



Principal Place of Business Mailing Address					1 (88)(6)( 844 (10)( 94)4) (13)4	// P) Q ((Q) Q( Q) Q (	12() 0(0)) 0(8)( 8	}	
		1949 N.E. 1ST STREET							
		DEERFIELD BEACH FL 33441	DEERFIELD BEACH FL 33441				00.05	, .	
					DO NOT WE		SPACE		1
					<ol> <li>Date Incorporated or Qualifer</li> <li>11/16/1989</li> </ol>	1.	•		
2 Dringing D	face of Business	2a. Mailing Address			4. FEI Number		I An	plied For	ł
<u> </u>	lace of Business	H .			65-0169122		— <del>— ``</del>	t Applicable	"
21 Suite, Apt.	# etc	Suite, Apt. #, etc.			03 0 103 122		\$8.75 A		
22	w, 610.	27			5. Certificate of Status Desired	, Π	Fee Re		
City & Stat	e	City & State			6. Election Campaign Financing	-	\$5.00	May Bo	1
23		28			Trust Fund Contribution	' 🗆	Added to		
Zip	Country	Zip	Cour	ntry	8. This corporation owes the cu	rrent vear Int	angible		
24	25	29 30	]		Personal Property Tax.	, ,		□No	
	9. Name and Address of Currer		<u> </u>		10. Name and Address of New	Registered	Agent		ĺ
				81 Name					
	GLEY, MARY ANNE			82 Street A	ddress (P.O. Box Number is Not Accep	table)			ł
1949 N.E. 1ST STREET				OZ SIFEEL A	duress (P.O. Box Number is Not Accep	iable)	. Alexandria de Servicio. La Alexandria de Servicio	4.3.4 ! <b>14.5</b> .	
DEE	RFIELD BEACH FL 33441		İ	83	5 3 4 3 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1.		<b>对社员</b>	1
						11. 14.6.5			ł
				84 City		FI	85 Zip C	Jode	
11 -Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes.	the at	ove-named o	orporation submits this statement for th	e purpose of	changing its	registered	1
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was auth	orized	by the corpor	ation's board of directors. I hereby according	pt the appoi	ntment as rec	gistered	
	im familiar with, and accept the obliga	stions of, Section 607.0505, Florida	Jiaiu	165.		* ••	•		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: Reg	pistered	Agent signature req	uired when reinstating)	DATE	•		۱ ـ
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN	ID DIRECTO	RS IN 12	Įĕ
TITLE	D	☐ DELETE ,	1.1 TIT	LE	4477		Change	☐ Addition	Ξ
NAME	LANGLEY, MARYANNE		1.2 NA	ME	· • • • • • • • • • • • • • • • • • • •				2
STREET ADDRESS	1949 NE 1ST STREET		1.3 STI	REET ADDRESS				-	l c
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CIT	Y-ST-ZIP	, i		٠.		8
TITLE	D	☐ DELETE	2.1 TIT	LE			☐ Change	☐ Addition	ء ا
NAME	LANGLEY, JAMES		2.2 NA	ME					
STREET ADDRESS	4040 NE 40T OTDEET		2.3 S∏	REET ADDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL		2.4 CI	TY-ST-ZIP					
TITLE		☐ DELETE	3.1 TIT				Change	Addition	}
NAME			3.2 NA	ME					
STREET ADDRESS	· :		3.3 STI	REET ADDRESS		57. 3 k · 6.	. 12 M. 18 5. 1	: Herig - (1 <b>54</b> )	
CITY-ST-ZIP		_	3.4. Cf	ry-st-zip	<del>YY</del>				
TITLE		☐ DELETE	4.1 TIT	LE			Change	Addition	1
NAME			4. 2 NA	ME					]
STREET ADDRESS			4.3 STI	REET ADDRESS					ł
CITY-ST-ZIP				Y-ST-ZIP	•	. ,	4		
TITLE		☐ DELETE	5.1 TIT		· · · · · · · · · · · · · · · · · · ·		Change	Addition	1
NAME			5.2 NA	ME			•		
STREET ADDRESS			5.3 STI	REET ADDRESS	•	*			
CITY-ST-ZIP				Y-ST-ZIP	200				Ĺ.,
TITLE		☐ DELETE	6.1 TIT				☐ Change	☐ Addition	
NAME		···-	6.2 NA	ME	i		•		
STREET ADDRESS			6.3 STI	REET ADDRESS	•		•		
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP					
	•								

14. 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 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:**