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

**CORPORATION ANNUAL REPORT** 1998

Politica

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name L76678

CARLINGFORD LAND COMPANY, INC.

(6)

FILED	
Apr 22 1998 8:00am	l
Secretary of State	

<b>9,412</b> 11								
Principal Place	e of Business	Mailing Address			f 1800 tabli dir 1804 daine dirin dirii 1962 t	itt genet mint	61631 61831 8101	il Albii ibai
760 BROADWAY LONGBOAT KEY FL 34228 LONGBOAT KEY FL 34228			28					
LONG DON' N	at to viaco	DO NOT WRITE IN THIS SPACE						
					3. Date Incorporated or Qualified			
					05/31/1990			
2. Principal P	Principal Place of Business  26  Suite, Apt. #, etc.  27				4. FEI Number		<u> </u>	oplied For
21					65-0194984			ot Applicable
Suite, Apt.					5. Certificate of Status Desired			Additional equired
City & State	City & State	State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	,	8. This corporation owes or has pa	aid the cu	rrent year Int	
24	25 9. Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 10. Name and Address of New Re			7 140
		ur vahistetan wäeur	81	Name	10. Hame and Address of New No.	-gistorou	Agent	
	STERLING, NICK		82					
	760 BROADWAY				dress (P.O. Box Number is Not Acceptal	ble)		
LO	N <b>GBO</b> AT KEY FL 34228		83			<del></del> -		<del> </del>
			84	City		FL	<b>85</b> Zip (	Code
SIGNATURE	m familiar with, and accept the oblig				poration submits this statement for the ation's board of directors. I hereby acceured when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS ANI		
TITLE	PD	☐ DELETE	1.1 TITLE				Change	Addition
NAME		EASTERLING, NICK						
STREET ADDRESS	760 BROADWAY		1.3 STREET	ADDRESS				
CITY-ST-ZIP	LONGBOAT KEY FL		1.4 CITY - 5	ST- ZIP			<del></del>	
TITLE	\$TD	☐ DELETE	2.1 TITLE		STD Share	'n	Change	Addition
NAME	MCLAUCHLIN, SHARON		2.2 NAME		2014 Diversi du R	ivd		
STREET ADDRESS	\$949 RIVERVIEW BLVD		2.3 STREET	ADDRESS	McLauchlin, Sharo 3949 Riverview B Bradenton, Fl.	. J. J	209	
CITY-ST-ZIP	ANNA MARIA FL	DELETE	2. 4 CITY- 3.1 TITLE	ST-ZiP	isrudenton, ti.		☐ Change	Addition
TITLE		□ pereue	3.1 THLE 3.2 NAME				□ cuarte	L. Nacillon
NAME ATTOTE ADDRESS			3.2 NAME 3.3 STREET	ADDDECC				
STREET ADDRESS			3.4. CITY -					
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	31-71L			Change	Addition
NAME		<u> </u>	4. 2 NAME					
STREET ADDRESS				ADDRESS				
CITY+ST-ZIP			4.4 City- S					
TITLE		DELETE	5.1 TITLE	27 211			Change	Addition
MAME			5.2 NAME				_	

14. Thereby 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.

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

mcParis 10-

4/16/98

941 /383-0511

☐ Change

Addition