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Feb 03 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # L97619

(5)

1. Corporation Name

VARGAS LAND COMPANY, INC.

Principal Place of Business

2905 NW 68 AVE  
GAINESVILLE FL 32606

Mailing Address

2905 NW 68 AVE  
GAINESVILLE FL 32653-1404

3. Date Incorporated or Qualified

08/30/1990

3a. Date of Last Report

02/12/1996

2. Principal Place of Business

21 6707 NW 33 ST

2a. Mailing Address

26 6707 NW 33 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Gainesville Florida

City & State

28 Gainesville Florida

Zip

24 32653

Country

Zip

29 32653

Country

30

4. FEI Number

59-3050865

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. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

VARGAS, ERNEST R.  
6707 NW 33 ST  
SUITE B-3  
GAINESVILLE FL 32653

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME VARGAS, ERNEST  
STREET ADDRESS 2905 NW 68 AVE  
CITY - ST - ZIP GAINESVILLE FL

☐ DELETE

TITLE D  
NAME VARGAS, CHRISTOPHER H.  
STREET ADDRESS 2905 NW 68 AVENUE  
CITY - ST - ZIP GAINESVILLE FL

☐ DELETE

TITLE D  
NAME VARGAS, JULIA  
STREET ADDRESS 6707 NW 33 STREET  
CITY - ST - ZIP GAINESVILLE FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 6707 NW 33 ST

1.4 CITY - ST - ZIP Gainesville FL 32653

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE:

Ernest R. Vargas

1-29-97 352-373-4296

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)