

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

FILED
Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90044 004 ***158.75

DOCUMENT # M73180

1. Corporation Name

L. AND SONS LAND DEVELOPMENT CORP.

Principal Place of Business

5610 RANCHES ROAD
LAKE WORTH FL 33463

Mailing Address

5610 RANCHES ROAD
LAKE WORTH FL 33463

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/22/1988

4. FEI Number

65-0032598

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 owes the current year intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 3460 Fairlane Farms Rd #14

Suite, Apt. #, etc.

22

City & State

23 Wellington, FL

Zip

24 33414

Country

25

2a. Mailing Address

26 3460 Fairlane Farms Rd #14

Suite, Apt. #, etc.

27

City & State

28 Wellington, FL

Zip

29 33414

Country

30

9. Name and Address of Current Registered Agent

CORNELIUS, LEE D.
5610 RANCHES ROAD
LAKE WORTH FL 33463

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ST ☐ DELETE
NAME CORNELIUS, LEE D.
STREET ADDRESS 5610 RANCHES ROAD
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE P ☐ DELETE
NAME CORNELIUS, LEE D., JR.
STREET ADDRESS 5610 RANCHES ROAD
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE V ☐ DELETE
NAME CORNELIUS, MICHAEL
STREET ADDRESS 5610 RANCHES ROAD
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/99

(561)792-4683

Date

Daytime Phone #

0355249

CR2E034 (1/98)