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FILED

Jan 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # M76330

(3)

1. Corporation Name

LAMPERT AND COMPANY, INC.

Principal Place of Business

3300 SW 34TH AVE.
SUITE 124-A
OCALA FL 34474

Mailing Address

P. O. BOX 770369
OCALA FL 34477-0369



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1988

4. FEI Number

59-2877878

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 2355 SE 17th St.

26 P.O. Box 2000

22 Suite, Apt. #, etc.
2nd Floor

27 Suite, Apt. #, etc.

23 City & State
Ocala, FL

28 City & State
Ocala, FL

24 Zip
34471

25 Country
Marion

29 Zip
34478-2000

30 Country
Marion

9. Name and Address of Current Registered Agent

LAMPERT, EVERETT D.
3300 SW 34TH AVE
SUITE 124-A
OCALA FL 34474

10. Name and Address of New Registered Agent

81 Name
Everett D. Lampert

82 Street Address (P.O. Box Number is Not Acceptable)
2355 SE 17th St.

83 2nd Floor

84 City
Ocala

FL

85 Zip Code
34471

11. Pursuant to the provisions of Sections 607.0502 and 607.1408, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with and accept the provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Everett D. Lampert

Everett D. Lampert, President

1/18/98

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME LAMPERT, EVERETT D.
STREET ADDRESS 5350 SW 28TH AVE.
CITY-ST-ZIP Ocala FL 34474

TITLE VST ☐ DELETE

NAME LAMPERT, ANNA
STREET ADDRESS 5350 SW 28TH AVE.
CITY-ST-ZIP Ocala FL 34474

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

1501 SE 14th Ave
Ocala, FL 34471

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

1501 SE 14th Ave.
Ocala, FL 34471

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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.

SIGNATURE:

Anna Lampert 1/18/98 (352) 732-4987

CR2E034 (10/97)