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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Moham 🧳 Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

M95388

(8)

LAN	MAR SHAW PROPERTIES, INC	.										
Principal Place of Business 601 RIVERSIDE AVE BLDG 2 STE 650 JACKSONVILLE FL 32204 US			Mailing Address 601 RIVERSIDE AVE BLDG 2 STE 650 JACKSONVILEL FL 32204 US					3. Date incorporated or Qualified				1
									ate Incorporated or Qualified 3a. Date of Last Report 08/23/1988 06/15/1995			
2. Principat	Place of Business	2a.	. Mailing Address					4. FEI Number 59-2903234	1	一门	Applied For Not Applicable	
Suite, Apt #, etc. 22			Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional Required] ,
City & Sta	nte	28	City & State					Election Campaign Financing Trust Fund Contribution			May Be	
Z(p	Country 25	29	Zip Coun 30			′		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes				
<u></u>]	9. Name and Address of Current		stered Agent	1001	T			10. Name and Address of New Re		Agent		⊣
	<u></u>			•	81	Name						7
	W, RALPH L JR.				82		Addres	s (P.O. Box Number is Not Acceptabl	e)			_
BLD	RIVERSIDE AVE G 2 STE 650				83					·····		1
JACI	KSONVILLE FL 32204				84	City			FL	85 Zi	p Code	
or regist	it to the provisions of Sections 607.0502 a tered agent, or both, in the State of Fiorida with, and accept the obligations of, Sectio	a. Such	i change was authorized	s, the abo d by the	corp	named co poration's	rporat board	ion submits this statement for the purp of directors. I hereby accept the appo	oose of ch intment a	ranging its s registered	egistered offic I agent. I am	;e
SIGNATURE												
	Signature, typical or printed name of registered agent a				d Agen	nt signature r	erjured w	Pien reinstating)	DATE	o o peor	200 111 40	_ જૂ
12.		OFFICERS AND DIRECTORS PS DELETE			13.			ADDITIONS/CHANGES TO OFFI		Change	Addition	CR2E034 (12/95)
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City-St-7if	TS		L'I DELETE	2 1		SI - ZIP	JUC	SUIVINE TE SECOT		Change	☐ Addition	5
NAME	THORTON, JOHN T										_	
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0:11 - \$1 - Zif'	eby certify that the information supplied w	iitha ekiin	filing is unfuntarily freeig			ST-ZIP	lify for	the everyntion stated in Section 110	77/3)/L) E	torida Statu	tas I further	X
certify the	ery certify that the information supplies w has the information indicated on this annua at Lani an officer or director of the corpor- in Block 12 or Block 13 if changed, or or	ai repo ation o	rt or supplemental annu ir the receiver or trustee	al report empowe	is tru	ue and ac	curate	and that my signature shall have the :	same lega	al effect as i	f made under	2,

Ralph Lamar Shaw, Jr. 1/17/96 904-358-0900 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: