FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

1998			DIVISION OF CORPORATIONS			IONS	Secretary of State
DOCUMENT # N21316 (7)							
LA GUARDAR INC.							
Principal Plac	e of Busines		Mailing Addre	255			
			-				
4966 COUNTY ROAD 656 WEBSTER FL 33597			4966 COUNTY ROAD 656 WEBSTER FL 33597				3. Date Incorporated or Qualified 06/25/1987
US			US				4. FEI Number Applied For
							59-2824643 Not Applicable
2. Principal P	·	2a. Mailing Address			5. Certificate of Status Desired S8.75 Additional		
Suite, Apt.	#. etc.		Suite, Apt. #, etc.			Fee Required 5. Election Campaign Financing \$5.00 May Be	
22	27	-			Trust Fund Contribution Added to Fees		
City & State	e		City & Staf	te			7. Is this nonprofit corporation a homeowners association?
Zip		Country	28		Count	· · · · · · · · · · · · · · · · · · ·	Yes W No 8. This corporation owes or has paid the current year Intangible
24		25	29		30	,	Personal Property Tax due June 30. Yes No
	9. Name	and Address of Curren	t Registered Agen				10. Name and Address of New Registered Agent
					8	Name	
CARTER, SHELBY R					83	2 Street A	Address (P.O. Box Number is Not Acceptable)
4966 COUNTY ROAD 656 WEBSTER FL 33597					83	3	
WEDOIL	.11 1 6 0000	·1			_	<u> </u>	
					84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.							
agent. I a	m familiar w	ith, and accept the obliga	ations of, Section 6	17.0503, Flo	rida Statute	es.	oration a board of directors. Thereby accept the appointment as registered
SIGNATURE _	Standille amer	or printed name of registered age	or and title if applicable	INOTE	Registered As	ent signature re	required when reinstating) DATE
12.	orginalists, types	OFFICERS AND		(4.5)2	13.	Jone Signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPD			DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME		R, SHELBY R			1.2 NAME	1	
STREET ADDRESS		OUNTY ROAD 656				T ADDRESS	
CITY-ST-ZIP TITLE	PD	ER FL 33597		DELETE	1.4 CITY - 2,1 TITLE	ST-ZIP	Change Addition
NAME		er, judith h	_		2,2 NAME		
STREET ADDRESS		DUNTY ROAD 656			2.3 STREE	T ADDRESS	
CITY - ST - ZIP		FR FL 33597	· · · · · · · · · · · · · · · · · · ·		2. 4 CITY	ST-ZIP	
TITLE	SD	AL LINDA I	Li	DELETE	3.1 TITLE		Change Addition
NAME		m, linda j S.W 46th way			3.2 NAME		
STREET ADORESS		ER FL 33597			3.4. CITY	T ADDRESS	
TITLE				DELETE	4,1 TITLE		Change Addition
NAME					4, 2 NAM	:	
STREET ADDRESS					4.3 STREE	T ADDRESS	
CITY-ST-ZIP				AF:	4.4 CITY-		
TITLE			L	DELETÉ	5.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS					5.2 NAME	T ADDRESS	
CITY-ST-ZIP					5.4 CITY -	1	
TITLE		······································		DELETE	6.1 TITLE		Change Addition
NAME					6.2 NAME		
STREET ADDRESS					6.3 STREE	TADDRESS	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

FILED

Feb 04 1998 8:00am