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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000002129 (5)

1. Corporation Name

SOUTH LAKE LAND TEAMS, INC.



Principal Place of Business

4740 CLEVELAND HEIGHTS BLVD
LAKE LAND FL 33807

Mailing Address

4740 CLEVELAND HEIGHTS BLVD
LAKE LAND FL 33807

3. Date Incorporated or Qualified
05/03/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, RONALD L
4740 CLEVELAND HEIGHTS BLVD
LAKE LAND FL 33807

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 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.

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PDD
NAME CLARK, RONALD L
STREET ADDRESS 926 EAST OLEANDER STREET
CITY-STATE-ZIP LAKE LAND FL

11.1 TITLE
11.2 NAME
11.3 STREET ADDRESS 4740 Cleveland Heights Blvd
11.4 CITY-STATE-ZIP Lakeland, FL 33813

TITLE D
NAME RODDA, J. R.
STREET ADDRESS 5070 HANOVER LN
CITY-STATE-ZIP LAKE LAND FL 33813

12.1 TITLE
12.2 NAME
12.3 STREET ADDRESS 5718 Coveview Dr. E.
12.4 CITY-STATE-ZIP Lakeland, FL 33813

TITLE D
NAME CAMPBELL, MIKE
STREET ADDRESS 4740 CLEVELAND HEIGHTS BLVD.
CITY-STATE-ZIP LAKE LAND FL

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14.1 TITLE
14.2 NAME
14.3 STREET ADDRESS
14.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

15.1 TITLE
15.2 NAME
15.3 STREET ADDRESS
15.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

16.1 TITLE
16.2 NAME
16.3 STREET ADDRESS
16.4 CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/96

941/687-7400

CP2E037 (12/95)