## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPORATION** ANNUAL REPORT



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

1996

1. Corporatio		0 (2)				
LANUI	RUM SOFTWARE, INC.				   {400  100  100 A0141 00101 80106 1101	ir Adli Aldil Gidil Gidil Gigil Didir Andri Andri Andri
			· <del></del> ·			
Principal Place of Business		Mailing Address	Mailing Address		Camping in and all talk its	ı encı əneni orası arkır ötöli ölüli ölüli 1881
2646 S.W. MAPP ROAD #205 P.O. BOX 842		2646 S.W. MAPP ROAD #205				
	42 FL 34990-7842	P.O. BOX 842 Palm City Fl. 349	90-7842			
			700 70 NL		3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal P	lace of Business	0- 14-9			02/02/1984	04/11/1995
21	lace or business	2a. Mailing Address			4. FE! Number 59-2338051	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State	e	City & State			6. Election Campaign Financing	= \$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip <b>24</b>	Country 25	Zip	Col	try	8. This corporation has liability for	intang ble tax under s 199.032,
	9. Name and Address of Curren	29 t Registered Agent	30		Florida Statutes Yes  10. Name and Address of New R	□ No
				81 Name	To. Halle and Radiess of New I	egistered Agent
LANDRI	UM, RICHARD, H			R2 Street Ade	togo (D.O. Doy Nine tog in Nine A	
2646 \$\	W MAPP ROAD, STE 205			DE Stieet Auc	fress (P.O. Box Number is Not Acceptab	ie;
	W. CORNELL AVE.			В3		
PALM C	CITY FL 34990			34 City		■■ 85 Zip Code
44 D						
or register	to the provisions of Sections 607.0502 red agent, or both, in the State of Florid th, and accept the obligations of, Section	la. Such change was autho	orized by the l	named corpo poration's boa	ration submits this statement for the pur ard of directors. Thereby accept the appo	pose of changing its registered office bintment as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent a	and the Samulana I	(NOT) Registers			
12.	OFFICERS AND		13.	to a 1 st Junior R. 180 has	MANUTED ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 10
TITLE	PTD	☐ DELETE	1.11			Change Addition
NAME	LANDRUM, RICHARD H.		1.2 N	!		
STREET ADDRESS	2949 S.W. CORNELL AVE.		135	LADORESS		
CITY-ST-ZIP	PALM CITY FL		1.4 0	ST ZIP		34990
TITLE	VSD LANDRUM, JANE S.	DELETE	2 1			Change Addition
NAME STREET ADDRESS	2494 S.W. CORNELL AVE.		22 N			
CITY-ST-ZIP	PALM CITY FL		235	LL ADDRESS		311000
TITLE	D	DELETE	3 1 1	ST- ZIF		34990 Addition
NAME	CLARK, ELIZABETH LANDRUM		3 2 N			Change Assiston
STREET ADDRESS	1353 MIDDLE RIVER DRIVE		. 33 \$	LADORESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		340	ST-ZIP		33304
TITLE	D DODENT	☐ DELETE	4.11			Change Addition
NAME	SWISHER, ROBERT		. 42 N			
STREET ADDRESS	4 BANCHORY CT. PALM BCH. GARDENS FL		438	I ADDRESS		22.1.2
CITY-ST-ZIP TITLE	I ALM DOTI. GANDENS FL	☐ DECETE	440	31-712		33418
NAME			5 1 1 5 2 N			☐ Change ☐ Addit∙on i
STREET ADDRESS			53 S	ADDRESS		
CITY-ST-ZIP			540	if - ZIF		
TITLE		☐ D£LE IE	6 1 1			Change Addition
NAME			62 N			
STREET ADDRESS			638	ADDRESS		
CITY-ST-ZiP	y cortify that the information	Okla +kata #line = 1= 112 1 11 11 11 11	54 C	1 - 71F		
certify that	y certify that the information supplied w the information indicated on this annua	al report or supplemental a	nnuat report	le and accura	or the exemption stated in Section 119.0 The and that my signature shall have the s	ame legal offect as if made under
oath; that I appears in	l am an officer or director of the corpora Block 12 or Block 13 if changed, or or	ation or the receiver or trus n an attachment with an ac	stee empowe idress.	o execute this	s report as required by Chapter 607, Flor	ida Statutes; and that my name
	Ó 11	4 1			A A /	, , , , , , , , , , , , , , , , , , , ,
SIGNAT	URE: SIGNATURE AND TYPED OR	MINTED NAME OF SIGNING OFF	ICER OR DIREC		3-70-46 (	401) 286-1324