

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P30634 (0)
1. Corporation Name
THE LANMAN COMPANIES, INC.



Principal Place of Business

21 N. TEXAS AVENUE
ORLANDO FL 32805
US

Mailing Address

120 Q. STREET N.E.
WASHINGTON D. 20002-2132
US

2. Principal Place of Business

21 Suite, Apt., #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

08/21/1990

3a. Date of Last Report

02/14/1996

4. FEI Number

52-1531951

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 has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BRACH, ROBERT W
4560 L B MCLEOD RD
SUITE 120
ORLANDO FL 32811

10. Name and Address of New Registered Agent

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 607.0507 and 607.1508, 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 of the firm for which, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not the same as the filer)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURTON, ROBERT G.	1.2 NAME	
STREET ADDRESS	101 PARK AVENUE	1.3 STREET ADDRESS	340 PEMBERWICK ROAD
CITY-STATE-ZIP	NEW YORK NE	1.4 CITY-STATE-ZIP	GREENWICH CT 06831
TITLE	VC	2.1 TITLE	PRESIDENT - OPERATIONS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REISCH, MARC L.	2.2 NAME	
STREET ADDRESS	101 PARK AVENUE	2.3 STREET ADDRESS	340 PEMBERWICK ROAD
CITY-STATE-ZIP	NEW YORK NE	2.4 CITY-STATE-ZIP	GREENWICH CT 06831
TITLE	VS	3.1 TITLE	EVP - LEGAL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, JENNIFER	3.2 NAME	
STREET ADDRESS	101 PARK AVENUE	3.3 STREET ADDRESS	340 Pemberwick Road
CITY-STATE-ZIP	NEW YORK NY	3.4 CITY-STATE-ZIP	Greenwich CT 06831
TITLE	V	4.1 TITLE	EVP CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZERRUSEN, RAYMOND B.	4.2 NAME	THOMAS M. PIERNO
STREET ADDRESS	101 PARK AVENUE	4.3 STREET ADDRESS	340 PEMBERWICK ROAD
CITY-STATE-ZIP	NEW YORK NE	4.4 CITY-STATE-ZIP	Greenwich CT 06831
TITLE	VT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK E SILVESTRO	5.2 NAME	
STREET ADDRESS	120 Q STREET NE	5.3 STREET ADDRESS	
CITY-STATE-ZIP	WASHINGTON DC	5.4 CITY-STATE-ZIP	
TITLE	AT	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LERNER, JAMES	6.2 NAME	
STREET ADDRESS	120 Q STREET NE	6.3 STREET ADDRESS	
CITY-STATE-ZIP	WASHINGTON DC 20002	6.4 CITY-STATE-ZIP	

14. I do 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 included 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 of this filing, or on an Attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS PIERNO 3/7/97 (203) 532-4289

Date

049806

CR2E034 (9/96)