

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P37734

(1)

1. Corporation Name

L & A PROPERTY TAX CONSULTANTS, INC.

Principal Place of Business

POST OFFICE BOX 1180  
QUITMAN TX 75783

Mailing Address

POST OFFICE BOX 1180  
QUITMAN TX 75783-1180

2. Principal Place of Business

21

2a. Mailing Address

26

Office Act # etc.

Suite, Apt #, etc.

27

City & State

23

City & State

Zip

24

Country

25

Zip

28

Country

30

9. Name and Address of Current Registered Agent

JONES, A. HARMAN, JR.  
501 W. HORATIO ST.  
TAMPA FL 33606

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 607.0502 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

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

DATE

12. OFFICERS AND DIRECTORS

DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DCS  
NAME LUTTRELL, JAMES L.  
STREET ADDRESS P.O-BOX 1200 N/A  
CITY-ST-ZIP GRAPEVINE TX

Change  Addition  
Rt. 1 Box 304- B  
Minden Tx 75773

P.O. Box 1180

Quinton, Tx 75783

TITLE  
NAME LUTTRELL, JAMES L.  
STREET ADDRESS P.O-BOX 1200 N/A  
CITY-ST-ZIP GRAPEVINE TX

Change  Addition  
Rt. 1 Box 304- B  
Minden Tx 75773

P.O. Box 1180

Quinton, Tx 75783

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition

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

SIGNATURE

ONE NICE FREE IN MIND

4-14-07 9A7-912-2126

FILED  
May 20 1997 8:00am  
Secretary of State



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