

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P92000013386 (7)

1. Corporation Name

LAKESCAPERS, INC.



Principal Place of Business

Mailing Address

200 GOODLETTE ROAD SOUTH
SUITE #7
NAPLES FL 33940

200 GOODLETTE ROAD SOUTH
SUITE #7
NAPLES FL 33940

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FROIAS, ELIZABETH A
200 GOODLETTE ROAD S., #7
NAPLES FL 33940

81 Name

Froais, Richard R

82 Street Address (P.O. Box Number is Not Acceptable)

200 Goodlette Rd. South

83

Suite #7

84

City Naples, Florida

FL

85 Zip Code 34102

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

Richard Froais

8/5/96

(Signature type, for printed name of registered agent and title, apply to all.)

(NOTE: Registered Agent signature expires when term expires.)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME FROIAS, ELIZABETH A
STREET ADDRESS 200 GOODLETTE ROAD S., #7
CITY-ST-ZIP NAPLES FL 33940

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE P
12 NAME Froais, Richard R
13 STREET ADDRESS 200 Goodlette Road s #7
14 CITY-ST-ZIP Naples, Florida 34102

21 TITLE S
22 NAME Elizabeth, Froais A
23 STREET ADDRESS 200 Goodlette Road S #7
24 CITY-ST-ZIP Naples, Florida 34102

31 TITLE M
32 NAME Luther, Robert
33 STREET ADDRESS 200 Goodlette Road S #7
34 CITY-ST-ZIP Naples, Florida 34102

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Richard Froais

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/5/96

800-266-0746

CR2E034 (3/96)