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

P93000012918 (7)

DOCUMENT #

LYPP OF LEHIGH, INC.

Principal Place of Business Mailing Address								110 11010 1010	1 11981 1911 1991
1318 LAFAYET CAPE CORAL		1318 LAFAYETTE ST CAPE CORAL FL 33904							
						3. Date Incorporated or Qualified 03/01/1993		of Last R 3/10/199	
2. Principal Pla 21	ce of Business	2a. Mailing Address			4. FEI Number Applied For 65-0390806 Not Applied			Applied For Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		.	Additional Required
City & State		City & State	<u> </u>			6. Election Campaign Financing			O May Be
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zıp	Countr	У		8. This corporation has liability for		x under s	199.032,
24	25 29 30			Florida Statutes Yes X No					
9. Name and Address of Current Registered Agent 81 Name						10. Name and Address of New I	Registered	Agent	
HILL, TH	OMAS W		8:			ss (P.O. Box Number is Not Accepta	blo)		
1318 LAFAYETTE ST				╛	Street Addres	3S (F.O. DOX NOTIDE IS NOT Accepta			
CAPE CORAL FL 33904				3					
			8	4	City		FL	85 Zi	p Code
or registere familiar witl SIGNATURE	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authorize tion 607.0505, Florida Statutes.	d by the cor	poi	ration's board	of directors. I hereby accept the app	pointment as	anging its r registered	registered office I agent. I am
				ent :	signature required v	when reinstating) ADDITIONS/CHANGES TO OFI	DATE	DIRECTO	NES IN 12
12.				1. 1 TITLE		ADDITIONS/OFFANGES TO OFF		Change	Addition
NAME	LYPP, PETRA						•	_	_
STREET ADDRESS	1318 LAFAYETTE ST		1.3 STRE	ET ADDRESS					
CITY - ST - ZIP	CAPE CORAL FL 33904			4 CITY-ST-ZIP					
TITLE	D □ DELETE 2 1			2 1 TITLE			[Change	☐ Addition
NAME	LYPP, ALEXANDER		2.2 NAMI	F					
Street Address	1318 LAFAYETTE ST		23 STRE	ET A	DDRESS				
CITY-ST-ZIP	CAPE CORAL FL 33904		24 CITY		- ZIP	- · · · · · · · · · · · · · · · · · · ·			
TITLE	D Hill, Thomas W.	☐ DELETE	3 1 TITLI					Change	☐ Addition
NAMÉ	1318 LAFAYETTE ST		3 2 NAMI						
STREET ADDRESS	CADE CODAL EL			3 3. STREET ADORESS					
CITY - ST - ZIP	Cru e containe	DELETE	3.4 CITY		- ZIP			Change	Addition
TITLE NAME		Doctor	4. 1 TITLE 4.2 NAME				,	Change	
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP			4.3 STE						
TITLE	DELETE 5.				£11			Change	Addition
NAME		1	5 2 NAMI				,		=
STREET ADDRESS			5.3 \$1RE	ET A	ADDRESS				

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

54 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZiP

6 1 THILE 6.2 NAME

SIGNATURE: 🗸

CITY-ST-ZIP

STREET ADDRESS

CITY - ST - ZIP

1ITLE

NAME

DELETE

Change Addition

CR2E034 (12/95)