

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Jul 19, 1999 8:00 am**  
**Secretary of State**

07-19-1999 90003 002 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P93000041443**

1. Corporation Name

**VINTAGE LAKE, INC.**

Principal Place of Business

**3647 CORTEZ RD W  
BRADENTON FL 34210  
US**

Mailing Address

**3647 CORTEZ RD W  
BRADENTON FL 34210  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/07/1993**

4. FEI Number

**65-0430506**

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 owes the current year  
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

**21 3643 Cortez Rd W**

Suite, Apt. #, etc.

**22 Suite #110**

City & State

**23 Bradenton, FL**

Zip

**24 34210**

Country

**25 US**

2a. Mailing Address

**26 3643 Cortez Rd W**

Suite, Apt. #, etc.

**27 Suite #110**

City & State

**28 Bradenton, FL**

Zip

**29 34210**

Country

**30 US**

9. Name and Address of Current Registered Agent

**CONARD, RICHARD T  
3647 CORTEZ RD W  
BRADENTON FL 34210**

10. Name and Address of New Registered Agent

81 Name

**Richard T Conard**

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

**3643 Cortez Rd W #110**

83

84 City

**Bradenton**

**FL**

85 Zip Code

**34210**

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **CONARD, RICHARD**  
STREET ADDRESS **3647 CORTEZ RD W**  
CITY-ST-ZIP **BRADENTON FL**

TITLE **DST** ☐ DELETE

NAME **CONARD, BETTY A**  
STREET ADDRESS **3647 CORTEZ RD W**  
CITY-ST-ZIP **BRADENTON FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS **3643 Cortez Rd W #110**  
1.4 CITY-ST-ZIP **Bradenton FL 34210**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS **3643 Cortez Rd W #110**  
2.4 CITY-ST-ZIP **Bradenton FL 34210**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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:

**Richard T. Conard**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7/12/99 941-727-4378**

CR2E034 (5/99)

590146-90003-2  
P930000 41443

RICHARD T CONARD, MD  
3643 CORTEZ RD W #110  
BRADENTON, FL 34210  
(941) 727-4378

July 12, 1999

Florida Department of State  
Annual Reports Filings  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed find a check in the amount of \$150.00 for the 1999-corporation filing fee for Vintage Lake, Inc. Per telephone conversation with one of your representatives, Steve, the late fee is not included in the total due to not receiving the first filing notice. Please note the corrections made to the address for future correspondence. It is understood that the next annual report form should be received no later than mid February 2000.

Sincerely,

*RTConard*

Richard T Conard

SIGNED FOR DR. CONARD  
IN HIS ABSENCE TO AVOID  
DELAY IN MAILING

*[Signature]*