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

PROFIT CORPORATION ANNUAL REPORT 1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 13 1997 8:00am

Secretary of State

(561)842-5427

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000047670 (3)

LANIER AND COMPANIES, INC.

Principal Place of Business Mailing Address \$892 PROSPECT AVENUE \$892 PROSPECT AVENUE \$UITE 6 RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404-3348					
U\$		US		3. Date Incorporated or Qualified 07/01/1993	3a. Date of Last Report 08/08/1996
	ace of Business	2a. Mailing Address		4. FEI Number 65-0425097	Applied For
Sufte, Apt. #, etc.		Suite Ant # etc	Suite, Apt. #, etc.		Not Applicable \$8.75 Additional
22		27	27		Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability fo	r inlangible tax under s. 199.032,
24	9. Name and Address of Cu		10	Florida Statutes 10. Name and Address of New F	Yes No
WQI.		NOULIS, ANTHONY J	- 81 Name > 4	1 MAILLIC ARTIAL	/U T
WEL	Lington Fl 83414 <i>Sea</i> 667! 576. Jupi	MEHEUSIVE BUSINESS VICES TENE W. INDIANTOWN RD 56-386 TER FL 33458	84 City J	AMOULIS, ANTHON TESS (P.O. BOX NUMBOT IS NOT ACCEPT TI W. INDIAN TOWN TOUR	FL 85 Zip Code 8
SIGNATURE		O Melec	s, the above-named corporal thorized by the corporal da Statutes.	obtration submits this statement for the top is board of directors. I hereby acc	purpose of changing its registered ept the appointment as registered 3/7/97
12.	OFFICERS	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LANIER, MELVIN R 18116 125TH AVENUE JUPITER FL 33478	mailing addites PRIFE ROBOX 7814 JUPITER, FL33468	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-7/P		Change Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP		DELĒTĒ	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	·	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ OFLETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		☐ Change ☐ Addition
14. I do hereb information I am an of	y certify that the information sup floor or director of the corporation Block 12 or Block 13 if change	oplied with this filing does not qualify tor supplemental annual report is tru on or the receiver or trustee mpower d. or on an attachment with an activity	for the exemption states e and accurate and that ed to execute this reported.	d in Section 119.07(3)(i), Florida Statu t my signature shall have the same le thas required by Chapter 607, Florida	les. I further certify that the gal effect as if made under oath; tha Statutes; and that my name