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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300064680 1. Corporation Name

H & G LANDHOLDINGS, INC.

Principal Place of Business
% DOUGLAS J. WALLER 604 OAK COMMONS BLVD. KISSIMMEE FL 34741

Mailing Address

% DOUGLAS J. WALLER

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90138 043 ***150.00



KISSIMMEE FL 34741		KISSIMMEE FL 34741			DO NOT WRITE IN THIS SPACE		
MOOMMEE 1E	VII 11				3. Date Incorporated or Qualifed 09/07/1993		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For
21		26		59-3203833		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired		Additional Required	
		27					
City & State	e	City & State			6. Election Campaign Financing		May Be d to Fees
23	0	28 7in	Country	,	Trust Fund Contribution		d to rees
Zip	Country	Zip	0	•	This corporation owes the current Personal Property Tax.	year intangible ☐ Yes	□No
24	9. Name and Address of Curren		···		10. Name and Address of New Regi		
	9. Name and Address of Curren	r registered Agent	81	Name	To. Namo and , takes of the second		
WALLER, DOUGLAS J							<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	OAK COMMONS BLVD.			82 Street Address (P.O. Box Number is Not Acceptable)			
KISS	IMMEE FL 34741			83			
			84	City		FL 85 Zi	p Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statutes	the abov	e-named co	rporation submits this statement for the pur	pose of changing	its registered
office or re agent. I a	egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was autions of, Section 607.0505, Florid	horized by la Statutes	the corpora	tion's board of directors. I hereby accept th	e appointment as	registered
SIGNATURE	Signature, typed or printed name of registered ager	t and title if configuration (NOTE: E	legistered Age	nt signature requi	ired when reinstating)	DATE	
12.		D DIRECTORS	13.	nt signature requ	ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	TORS IN 12
TITLE	PD	DELETE	1.1 TITLE			Chang	
NAME	KARR, MICHAEL A		1.2 NAME				
STREET ADDRESS	604 OAK COMMONS BLVD.		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL 34741		1.4 CITY-S	T-ZIP			
TITLE	VD VD	☐ DELETE	2.1 TITLE			Chang	e Addition
NAME	KORNBERG, MARKUS		2.2 NAME				
STREET ADDRESS	604 OAK COMMONS BLVD.		2.3 STREE	TADDRESS			
CITY-ST-ZIP	KISSIMMEE FL 34741		2. 4 CITY-5	ST-ZIP			
TITLE	SD	☐ DELETE	3.1 TITLE			Chang	e 🔲 Addition
NAME	GORDON, SCOTT		3.2 NAME				
STREET ADDRESS	604 OAK COMMONS BLVD.		3.3 STREE	T ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL: 34741		3.4. CITY-	ST-ZIP			
TITLE	TD	☐ DELETE	4.1 TITLE			☐ Chang	ge Addition
NAME	HENNINGSEN, HARALD J		4. 2 NAME				
STREET ADDRESS	604 OAK COMMONS BLVD.		4.3 STREE	TADORESS			
CITY-ST-ZIP	KISSIMMEE FL 34741		4.4 CITY- \$	ST-ZIP			- A d-685-
TITLE		☐ DELETE	5.1 TITLE			☐ Chang	ge Addition
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Chang	ge Addition
NAME			6.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			6.4 CITY-5	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 fue 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 of 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 any address, with all given into the empowered.

SIGNATURE: