

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000068898 (4)

1. Corporation Name

SCENIC LAND DEVELOPMENT CORPORATION



Principal Place of Business

1500 E. ATLANTIC BLVD
POMPANO BCH FL 33060

Mailing Address

1500 E. ATLANTIC BLVD
POMPANO BCH FL 33060

3. Date Incorporated or Qualified

09/27/1993

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

24

Zip

25

Country

29

Zip

30

Country

4. FEI Number

65-0446216

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROTH, RICHARD H
1500 E ATLANTIC BLVD
POMPANO BEACH FL 33060

81 Name

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

83

84 City

FL

85 Zip Code

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 PTD
NAME SHELTON, DAVID ☒ DELETE
STREET ADDRESS POB 160085 NA
CITY-ST-ZIP BIG SKY MT

TITLE VSD
NAME GERRARD, KENNETH M ☐ DELETE
STREET ADDRESS 2920 SW 22ND AVE #601
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE V
NAME RICHARD H. ROTH ☐ DELETE
STREET ADDRESS 1500 E. ATLANTIC BLVD
CITY-ST-ZIP POMPANO BCH FL 33060

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 PD
1.2 NAME SHELTON, DAVID ☒ Change ☐ Addition
1.3 STREET ADDRESS PO Box 160085
1.4 CITY-ST-ZIP BIG SKY, MT 59716

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE VTD
4.2 NAME LASHLEE, WILLIAM B. ☐ Change ☒ Addition
4.3 STREET ADDRESS 104 SPYGLASS
4.4 CITY-ST-ZIP ST. SIMONS ISLAND, GA 31522

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard H. Roth 2/20/96 954-942-6500

Date

Daytime Phone #

CR2E034 (12/95)