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 # P93000073504

1. Corporation Name

THE NEW CHIMNEY ROCK LAND COMPANY

Principal Place of Business
2 NORTH TAMIAMI TRAIL SUITE 302
SARASOTA FL 34236

Mailing Address

2 NORTH TAMIAMI TRAIL

SUITE 302

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90090 021 ***150.00



DO NOT WRITE IN THIS SPACE

SARASOTA FL 34236	SARASOTA FL 34236	SARASOTA FL 34236		סט אטן אירו הוו אווים אוא נטא טע	DO NOT WRITE IN THIS SPACE		
			•	3. Date Incorporated or Qualifed			
				10/22/1993			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
21 3535 Jacinto	Court 26 P.D.BOX	254	27	65-0450151	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22 27			-				
City & State	City & State	<u>_</u>	ユノ	6. Election Campaign Financing	\$5.00 May Be Added to Fees		
23 Sarasota H	28 Sara607	Count	10	Trust Fund Contribution			
Zip Countr 24 34239 [25] 66 2	·		SA	8. This corporation owes the current year Intang	gible Yes □No		
<u> </u>	<u> </u>	30 4	071	Personal Property Tax. 10. Name and Address of New Registered Ag			
9. Name and Addre	ess of Current Registered Agent	8	1 Name	to, radile and Address of New Tragistored Ag			
CLOUD, JOHN V		Ľ					
3920 RED ROCK WAY		8	2 Street	Address (P.O. Box Number is Not Acceptable)			
SARASOTA FL 34231		8	2		_		
¢ 0,40,00 11,112 0,120 1			٦				
i,γ	,	8	4 City	FL	85 Zip Code		
1	tions 607.0502 and 607.1508. Florida Statu	utes, the abo	 ve-named	corporation submits this statement for the purpose of ch	anging its registered		
office or registered agent, or both	i, in the State of Florida. Such change was	authorized b	y the corpo	pration's board of directors. I hereby accept the appoint	nent as registered		
agent. I am familias with, and acc	ent the obligations of, Section 607.0505, Fl		ъ.	H5-	799		
SIGNATURE Signature Typed or printed name	douck Sussidered agent and title if applicable. (NOT		ent signature n	equired when reinstating) DATE			
	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12		
TITLE P	☐ DELETE	1.1 TITLE		\mathcal{P}	Change		
NAME JOHN V. CLOUD,		1.2 NAMI	:	John V. Cloude Could			
STREET ADDRESS 2 NORTH TAMIAMI	TRAIL, STE, 302	1.3 STRE	ET ADDRESS	3535 Jack No Court	ł		
CITY-ST-ZIP SARASOTA FL 342		1,4 CITY	ST-ZIP	John V. Cloud 3535 Jacinto Court Garasota, 7L 34239			
TITLE	☐ DELETE	2.1 TITLE			Change Addition		
NAME		2.2 NAMI	:		į		
STREET ADDRESS		2.3 STRE	ET ADDRESS		·		
Crry-st-zip	→ 3	2.4 CITY	-ST-ZIP	g y y y y	~		
TITLE	☐ DELETE	3.1 TITLE		[Change Addition		
NAME		3.2 NAM					
STREET ADDRESS		3.3 STRE	ET ADDRESS		į		
CITY-ST-ZIP		3.4. CITY	-ST-ZIP				
TITLE	☐ DELETE	4.1 TITLE			Change Addition		
NAME		4, 2 NAM	E				
STREET ADDRESS		4.3 STRE	ET ADDRESS		}		
CITY-ST-ZIP		4.4 CITY	ST-ZIP				
TITLE	☐ DELETE	5.1 TITLE			Change Addition		
NAME		5.2 NAM			1		
STREET ADDRESS		5.3 STRE	ET ADDRESS]		
CITY-ST-ZIP		5.4 CITY	ST-ZIP				
TITLE	☐ DELETE	6.1 TITLE			Change Addition		
NAME		6.2 NAM	:]		1		
STREET ADDRESS		6.3 STRE	ET ADDRESS				
		64 CITY	ST. 71P				

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, with all other like empowered.

SIGNATURE: