

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000087604

1. Entity Name

LAND INVESTMENT SERVICES, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90075 014 ***150.00

Principal Place of Business

2040 CLARKE AVENUE
FT. MYERS FL 33905
US

Mailing Address

7370 COLLEGE PKWY.
SUITE 300
FORT MYERS FL 33907-5501

2. Principal Place of Business

3. Mailing Address

13141 Mcgregor Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 9

City & State

City & State

Fort Myers

Zip

Country

Zip

Country

33919

4. FEI Number

65-0456926

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

13141 Mcgregor Blvd., Suite 9

City

Fort Myers

FL

Zip Code

33919

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VPDS	<input type="checkbox"/> Delete
NAME	SCHUMANN, RAYMOND L	
STREET ADDRESS	2040 CLARKE AVENUE	
CITY-ST-ZIP	FT. MYERS FL 33905	
TITLE	PD	<input type="checkbox"/> Delete
NAME	CASE, ROBERT	
STREET ADDRESS	2040 CLARKE AVENUE	
CITY-ST-ZIP	FT. MYERS FL 33905	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	SCHUMANN, RONALD L	
STREET ADDRESS	2040 CLARKE AVENUE	
CITY-ST-ZIP	FT. MYERS FL 33905	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HUNT, PATRICK C	
STREET ADDRESS	2040 CLARKE AVE	
CITY-ST-ZIP	FT MYERS FL 33905	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Raymond L. Schumann 2.7.00 941-415-2525

Date

Daytime Phone #

CR 0014 (0000)