

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

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



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

95 APR 26 AM 9:18

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P941000068711

1. Corporation Name

LM VENTURE PROPERTIES, INC.

Principal Place of Business

Mailing Address (same)

**1134 POINT NEWPORT TERR. Ste 104
Casselberry, FL 32707**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 3a. Date of Last Report

9/19/94

4. FEI Number Applied For
59-3267769 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. 190.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. (same)	26. (same)
22. Suite Apt. # etc.	27. Suite Apt. # etc.
23. City & State	28. City & State
24. Zip	25. Country
29. Zip	30. Country

9. Name and Address of Current Registered Agent

**CYNTHIA PHILLIPS
1134 POINT NEWPORT TERR. Ste 104
CASSELBERRY, FL 32707**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. State
85. Zip Code

11. Pursuant to the provisions of Sections 607.02 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. Such change was authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE

Cynthia Phillips

4/17/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	CYNTHIA PHILLIPS (PRES, SEC, TREAS)	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	1134 POINT NEWPORT TERR. Ste 104	2. STREET ADDRESS	
3. CITY & STATE	CASSELBERRY, FL 32707	3. CITY & STATE	
4. NAME		4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS		5. STREET ADDRESS	
6. CITY & STATE		6. CITY & STATE	
7. NAME		7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY & STATE		9. CITY & STATE	
10. NAME		10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY & STATE		12. CITY & STATE	
13. NAME		13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY & STATE		15. CITY & STATE	

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****200.00 ****200.00**

4/26/95

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.03(2)(b), Florida Statutes. I further certify that the information included on this report is true and accurate and that my signature shall have the same legal effect as if made under oath. This report is effective as of the date of filing of this report or the date of filing of this report as required by Chapter 607, Florida Statutes, and that my name appears on the back of this report as required by Chapter 607, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cynthia Phillips

4/1/95 (427) 767-8604