

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 26 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000088638 (9)

1. Corporation Name

LUAD, INC.

Principal Place of Business

1342 COLONIAL BLVD.
SUITE 34
FT. MYERS FL 33907

Mailing Address

1342 COLONIAL BLVD.
SUITE 34
FT. MYERS FL 33907

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/07/1994

3a. Date of Last Report

4. FEI Number

65-0540893

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 2075 West First Street

Suite, Apt. #, etc.

22 Suite 300

City & State

23 Fort Myers, FL

24 Zip
33901

25 Country
Lee

2a. Mailing Address

26 2075 West First Street

Suite, Apt. #, etc.

27 Suite 300

City & State

28 Fort Myers, FL

29 Zip
33901

30 Country
Lee

9. Name and Address of Current Registered Agent

WILTSHIRE, WARREN B JR
1342 COLONIAL BLVD.
SUITE 34
FT. MYERS FL 33907

10. Name and Address of New Registered Agent

81 Name

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

2075 West First Street

83 Suite 300

84 City
Fort Myers

FL

85 Zip Code
33901

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 constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
D
WILTSHIRE, WARREN B JR
STREET ADDRESS
1342 COLONIAL BLVD., SUITE 34
CITY - ST - ZIP
FT. MYERS FL 33907

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
PD
1.2 NAME
1.3 STREET ADDRESS
2075 West First Street, Suite 300
1.4 CITY - ST - ZIP
Fort Myers, FL 33901
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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)(b), 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:

WARREN B. WILTSHIRE, JR., DIRECTOR & PRESIDENT

Date

4-1-95

813-334-9191

Daytime Phone