

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Barbara B. Mouton
Secretary of State
Tallahassee, Florida 32399-0001

**APPROVED
AND
FILED**

1995 MAY 1 10:15

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

REMITTED BY MAY 1

DOCUMENT # P94000093099 (7)

DIVERS OF LAKE LAND, INCORPORATED

Principal Office: 5807 PAPAYA STREET
FORT PIERCE FL 34982
Mailing Address: 5807 PAPAYA STREET
FORT PIERCE FL 34982

3. Date of Report (or Liquidation)	3a. Date of Last Report
12/22/1994	
4. Filing Fee	5. Certificate of Status (Domestic) ☐ ☒
59-3286535	\$8.75 Additional Fee Required
6. Certificate of Status (Foreign) ☐ ☒	\$5.00 May Be Added to Fees
8. Does corporation have liability for obligations due under Florida Statutes ☐ Yes ☒ No	

2. Principal Office (or Liquidation)	2a. Mailing Address
21. State of Report	26. State of Report
22. City & State	27. City & State
23. Zip	28. Zip
24. Zip	29. Zip
25. Zip	30. Zip

9. Name and Address of Current Registered Agent

KIRSCH, JEFFREY M ESQ.
43 SEMINOLE STREET
STUART FL 3494

10. Name and Address of New Registered Agent

81. Name	85. State
82. Agent's Office (or Liquidation) (Not Registered in Not Acceptation)	
83. City	
84. City	FL

11. Pursuant to the provisions of the laws of the State of Florida, and the Florida Statutes, the above named corporation has made this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. This change was authorized by the corporation's Board of Directors, a meeting of said the corporation's registered agent, or both, and is subject to the provisions of the laws of the State of Florida.

SIGNATURE: _____

12. Officer or Agent (or Liquidation)

NAME	D PALERMO, NESTOR
STREET ADDRESS	14601 ORANGE AVENUE BLDG. 3
CITY	FORT PIERCE FL 34982
NAME	D PALERMO, FRANK
STREET ADDRESS	14601 ORANGE AVENUE BLDG. 3
CITY	FORT PIERCE FL 34982

13. Officer or Agent (or Liquidation)

NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY		
NAME		
STREET ADDRESS		
CITY		
NAME		
STREET ADDRESS		
CITY		
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STREET ADDRESS		
CITY		
NAME		
STREET ADDRESS		
CITY		
NAME		
STREET ADDRESS		
CITY		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and given in good faith for the reasons stated on the back of this report. I further certify that the information is true and correct to the best of my knowledge and belief, and that the corporation has no other information that would cause it to be otherwise. I am a director of the corporation and I am not a shareholder of the corporation.

SIGNATURE: _____
PRINT NAME AND TYPED OR PRINTED NAME OF INDIVIDUAL WITH SIGNATURE