AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 03 1996 8:00 am
Secretary of State

DOCUMENT # P9500027306

LANDINGS IMPROVEMENT COMPANY Principal Place of Business 400001940464 Mailing Address -09/06/96--01003--**-**008 2854 Becca Ave ****61.25 *****61,25 Naples, FL 34112 3. Date Incorporated or Qualified 3a. Date of Last Report April 6, 1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2854 Becca Ave. 26 2854 Becca Ave. 65-0570700 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 22 5. Certificate of Status Desired 27 City & State Fee Required City & State Election Campaign Financing \$5.00 May Be Naples, Naples, 28 Trust Fund Contribution Added to Fees Country Zin Country This corporation has liability for intangible tax under s. 199.032. 24 25 Collier 29 34112 Collier Florida Statutes Yes X No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name Dale H. Steinberg 82 2854 Becca Ave. Street Address (P.O. Box Number is Not Acceptable) Naples, FL 34112 83 84 City Zip Code 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. Dale H. Steinberg, President SIGNATURE Signature, typed or printed name of registered agent and title if applicable INO1E Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE DELETE 11 TITLE PDT X Change Addition Daie H. Steinberg 2854 Becca Ave. NAME 1.2 NAME Dale H. Steinberg STREET ADDRESS 13 STREET ADDRESS Naples, FL 34112 2854 Becca Ave. CITY-ST-ZIP 14 CITY - ST - ZIP Naples, FL 34112 VDS David Steinberg DELETE 21 DELE Change Addition NARTE 2 2 NAME 2854 Becca Ave. STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP Naples, FL 34112 2 4 CITY - ST- ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3 4 CITY - ST - ZIP TITLE DELETE 41 FITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY - ST - 2# TITLE DELFTE 5 1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 7IP MIT F DELFIF 6 I TITLE Change [NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS C11Y - ST - 2IP 64 CITY ST 2IP 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)(k). Florida Statutes 1 unther certify that the information indicated on this aritual 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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, prior an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIFIC

David Steinberg

8/26/96

(41) 775-3335