May 06, 1999 8:00 am Secretary of State

05-06-1999 90119 012 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000031684

1. Corporation Name

THE VILL	age at lehigh, inc.				
Principal Place	e of Business	Mailing Address			DE STREET TREET ENIES FOLIS ET EL FOUT
1251 TAYLOR LANE EXT. P. O. BOX 931 6F LEHIGH FL 33970 LEHIGH FL 33936 US				DO NOT WRITE IN THI	S SPACE
US		•		3. Date Incorporated or Qualifed 04/24/1995	
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26			65-0605388	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State		· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be	
23 28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year li	ntangible
24	25	29	30	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curre			10. Name and Address of New Registered	d Agent
			81 Name	R Pormolds In	
SCHREINER, ERICH			82 Street Addr	. B. Reynolds Jr.,	
1251 TAYLOR LANE EXT.			8	ress (P.O. Box Number is Not Acceptable) 01 W. Leeland Hgts. Blvd.	
STE 6F			83 _T	ehigh Acres, Fl., 33936	
LEHIGH FL 33936			84 City	enign Acres, Fr., 55750	85 Zip Code
			1 1 1	FI	
11. Pursuant office or reagent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the obligi	02 and 607.1508, Florida Statute e of Florida. Such change was au ations of, Section 607.0505	s, the above-named corp thorized by the corporation of Statutes.	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered ointment as registered
SIGNATURE	A. B. Reynolds Jr	·	Stelle	(OL) Y 4-70	2-49
	Signature, typed or printed name of registered age			AD DITIONS/CHANGES TO OFFICERS A	
12.		ND DIRECTORS	13. //	ADMITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	P COURTINED EDIOU I	□ belete			
NAME [SCHREINER, ERICH J 1251 TALYOR LANE EXT., STE. 6F		1.2 NAME		
STREET ADDRESS		IE. OF	1.3 STREET ADORESS		j
CITY-ST-ZIP	LEHIGH FL	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE		□ beceit			
NAME			2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
TITLE			3.2 NAME		
NAME			3.3 STREET ADDRESS		}
STREET ADDRESS			3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
		<u> </u>	4. 2 NAME		
NAME CTDEET ADODESS			4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
			5.2 NAME		
STREET ADDRESS	Secondaria		5.3 STREET ADDRESS		\
· '					i
CITY-ST-ZIP .	1 . ~		5.4 CITY-ST-ZIP		1
TITLE	2,21, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	DELETE	6.1 TITLE		Change Addition
TITLE	of the Control of the Control	☐ DELETE			☐ Change ☐ Addition

14. 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 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 or an attachagent with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Erich Schreiner SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99