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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

## DOCUMENT # **P95000045347 (8)**1. Corporation Name

POINCIANA LAND, INC.

Principal Place of Business

Mailing Address

4500 PGA BLVD., STE, 304B PALM BEACH GARDENS FL 33418 4500 PGA BLVD., STE. 304B PALM BEACH GARDENS FL 33418 FILED May 01 1996 8:00 am Secretary of State

PALM BEACH GARDENS FL 33418		PALM BEACH GARDENS FL 33418			
		y		3. Date Incorporated or Qualified 06/06/1995	3a. Date of Last Report
2. Principal Place		2a. Mailing Address		4, FEI Number	Applied For
	ackenhut Drive	····	kenhut Drive	65-0590453	Not Applicable
Suite, Apt. # 22 Suite 1		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & State	110	27   Suite 11	0		Fee Required
	each Gardens FL	Orty & State	ah Candona ET	6. Election Campaign Financing	\$5.00 May Be
Zip	Country		ch Gardens FL	Trust Fund Contribution	Added to Fees
33410	<b>25</b> ]	<sup>Ζφ</sup> 33410	Gountry [30]	8. This corporation has liability for in	
7 33410	9. Name and Address of Curren	nt Registered Agent	30	Florida Statutes Yes  10. Name and Address of New Ro	
			81 Name	IV. Hame and Address of New A	streing with
TAMBONI	E, RICHARD P				
	A BLVD., STE. 304B		82 Street A	Address (P.O. Box Number is Not Acceptable	e)
	•		83		
PALM DE	ACH GARDENS FL 33418		03		
			84 City		<b>85</b> Zip Code
11 Discussion	the pre island of C-ut COZ 0500		· · · · · · · · · · · · · · · · · · ·	poration submits this statement for the purp	FL   The second
	d agent, or both, in the State of Floric i, and accept the obligations of, Scoti			poration solutions this statement for the purpoporard of directors. Thereby accept the appo	intment as registered agent. Fam
SIGNATURE	light at the dispersion persons makes of real-stated agont				
12.	OFFICERS AND		(N. H. Registered April 1 signature re		DATE
TITLE	D	DELETE	1 1 1/1/16	ADDITIONS/CHANGES TO OFFICE  DVS	Change Addition
NAME	TAMBONE, LORI B		1.2 NAME	DVS	™ cuands ☐ vanition
STREET ADDRESS	4500 PGA BLVD., STE. 304B			4200 tts -11 5	
CITY - ST-ZIP	PALM BEACH GARDENS FL :		1.3 STREET ADDRESS	4200 Wackenhut Dr., Su	ite 110
TITLE	D	SOTIO ["] DELFTE		Palm Beach Gardens FL	
NAME	TAMBONE, RICHARD P		2 2 NAME	DPT	Change 🔲 Addition
STREET ADDRESS	4500 PGA BLVD., STE. 304B			4200 Maalaaalaa 8	
CITY - ST - ZIP	PALM BEACH GARDENS FL :	22410		4200 Wackenhut Dr., Su	
TITLE	TALM BEAUTY GATIBETTS TE S	DELFTE	24 City - St - 7-P	Palm Beach Gardens FL	
NAME			3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS					
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4 C(TY - ST - Z)F 4.1 T) FLE		
NAME		L.J Decent			Change Addition
STREET ADDRESS			4.2 NAME		
			4.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	4.4 CHT+SI-ZIP		
NAME		[] with	5 1 TITLE		Change Addition
			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		F 1051516	5.4.C-TY+ST-ZiF		
		DELETE	6 1 TITLE		Change 🔲 Addition
NAME			€ 2 NAME		
STREET ADDRESS			6 3 STHEFT ADDRESS		
CITY - ST - ZIP			6 4 CITY - ST - ZIF		
certify that the oath; that I a	cerury that the information supplied vible information indicated on this annulance an officer or director of the comp	cu report or supplemental a lation or the re <b>est er o</b> s tru	furnished and does not quali annual report is true and add istee empowered to execute iddress	ly for the exemption stated in Section 119.0 urate and that my signature shall have the s this report as required by Chapter 607, Flor	7(3)(k), Florida Statutes I further ame legal effect as if made under eda Statutes, and that my page.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

42696

407-675-0008

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