## 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

## **FILED** Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90032 025 \*\*\*150.00

## DOCUMENT # P95000054024

1. Corporation Name

NATIONAL LAND TRUST CORPORATION

Principal Place of Business 7235 1ST VE S SUITE 201
ST. PETERSBURG FL 33707 US
2. Principal Place of Busines
21 7235 151

Mailing Address

7235 1ST AVE S

|--|

PETERSBURG FL 33707 ST. PETERSBURG FL 33707			DO NOT WRITE IN THIS SPACE		
	US		3. Date Incorporated or Qualifed		
			07/13/1995		
Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
7235 IST AVS. SO.	26 7235 /ST AN	.محد .	06-1437808	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
ST. POTERSOURL FL	City & State 28 ST. PSTERSOVRE	b. FL.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 33707 25 USA	Zip Cou	intry USA	This corporation owes the current year Interest Personal Property Tax.	Yes □No	
9. Name and Address of Curren	t Registered Agent	10. Name and Address of New Registered Agent			
IAV D UTDOMA DA		81 Name V	RONA LAW GROUP, P.	A.	
JAY B. VERONA, P.A. 7235 1ST AVE S		82 Street Address (P.O. Box Number is Not Acceptable)			
		7235	IST AVE. SO.		
SUITE 201		83			
ST. PETERSBURG FL 33707		OA City		95 Zin Code	

ST. PATERSBURG 33707 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, and accept the obligations of Section 607.0505. Florida Statutes.

agent. I ar	agent. I am familiar with, and accept the obligations of, Section 607/0505, Florida Statutes.								
	B): July July PRES. Signature, typed of intend name of registered agent and title if applical		QQAAA) gistered Agent signature re	1/14/1/					
12.	OFFICERS AND DIRECTOR	S	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO					
TITLE	PD ·	☐ DELETE	1.1 TITLE	☐ Change	☐ Addition				
NAME	PAYNE, CLARKE		1.2 NAME						
STREET ADDRESS	228-1 MILE CREEK ROAD		1.3 STREET ADORESS						
CITY-ST-ZIP	OLD LYME CT 06371		1.4 CITY-ST-ZIP						
TITLE		☐ DELETE	2.1 TITLE	☐ Change	☐ Addition				
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET ADDRESS						
CITY-ST-ZIP			2.4 CITY-ST-ZIP						
TITLE		C DELETE	3.1 TITLE	Change	□ Addition				
NAME .		<b>- -</b>	3.2 NAME -	والمحاجم فللمستوين والمحاربي بمعارض والمراز والمرازي والمرازية					
STREET ADDRESS			3.3 STREET ADDRESS		ļ				
CITY-ST-ZIP			3.4. CITY-ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE	Change	☐ Addition				
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE	Change	Addition \				
NAME			5.2 NAME						
STREET ADDRESS		•	5.3 STREET ADDRESS		ł				
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE	Change	☐ Addition				
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						
CITY-ST-ZIP			6.4 CITY-ST-ZIP						

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, with an address, with all other like empowered.

SIGNATURE:

860.434.5022