

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
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90207 040 ***150.00

DOCUMENT # P95000057990

1. Corporation Name

LONDON & CLYDESDIE INVESTMENTS, INC.

Principal Place of Business

P.O. BOX 5147
CLEARWATER FL 33758
US

Mailing Address

P.O. BOX 5147
CLEARWATER FL 33758
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1995

4. FEI Number

52-1950033

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

LECHNER, BERNARD J
1243 LAKEVIEW ROAD
CLEARWATER FL 33756

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
2115 Range Road

83

84 City
Clearwater

FL

85 Zip Code
33765

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Bernard J. Lechner

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME LECHNER, BERNARD J
STREET ADDRESS 1243 LAKEVIEW RD.
CITY-ST-ZIP CLEARWATER F; 33756

TITLE VP/D ☐ DELETE

NAME MCINTYRE, JOHN
STREET ADDRESS THE WHITE HOUSE OF MILLIKEN
CITY-ST-ZIP BROOKFIELD, RENFREWSHIRE

TITLE SD ☐ DELETE

NAME MCINTYRE, VALERIE
STREET ADDRESS THE WHITE HOUSE OF MILLIKEN
CITY-ST-ZIP BROOKFIELD, RENFREWSHIRE

TITLE AS ☐ DELETE

NAME GILMORE, ROBERT A
STREET ADDRESS 395 CYPRESS CREEK CIR.
CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 2115 Range Road
1.4 CITY-ST-ZIP Clearwater, FL 33765

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bernard J. Lechner

Date

Daytime Phone #

4/8/99

727/461-3662

CR2E034 (11/98)