

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 # P95000067158**

1. Corporation Name  
**LAWSON LAND COMPANY**

## Principal Place of Business

8160 NW 83 ST  
MEDLEY FL 33166

## Mailing Address

8160 NW 83 ST  
MEDLEY FL 33166

## 2. Principal Place of Business

21 110 S.E. 6th St.  
Suite, Apt. #, etc.  
22 28th Floor  
City & State  
23 Ft. Lauderdale, FL  
Zip  
24 33301 Country  
25 US

## 2a. Mailing Address

26 110 S.E. 6th St.  
Suite, Apt. #, etc.  
27 28th Floor  
City & State  
28 Ft. LAUDERDALE, FL  
Zip  
29 33301 Country  
30 US

## 9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

## 81. Name

## 82. Street Address (P.O. Box Number is Not Acceptable)

## 83.

## 84. City

## 3. Date Incorporated or Qualified

08/30/1995

## 4. FEI Number

65-0616145

## 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

## 10. Name and Address of New Registered Agent

200002792632--6  
-03/02/99-01080-014  
\*\*\*\*150.00-\*\*\*\*150.00

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

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

(NOTE: Registered Agent's signature required when changing agent.)

(DATE)

## 12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	DPST LAWSON, JOHN	8160 NW 93RD ST	MEDLEY FL 33166	X DELETE
				[ ] DELETE
				[ ] DELETE
				[ ] DELETE
				[ ] DELETE
				[ ] DELETE

## 13.

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	D HARRIS W. HUDSON	110 SE. 6th St. 28th Floor	Ft. LAUDERDALE, FL 33301	[ ] Change [ ] Addition
	P JAMES H. COSMAN	110 SE. 6th St. 28th Floor	Ft. LAUDERDALE, FL 33301	[ ] Change [ ] Addition
	S DAVID A. BARCLAY	110 SE. 6th St. 28th Floor	Ft. LAUDERDALE, FL 33301	[ ] Change [ ] Addition
	T Edward A. LANG, III	110 SE. 6th St. 28th Floor	Ft. LAUDERDALE, FL 33301	[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] 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 registered agent 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

2/17/99 769-2928