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Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000007785 (4)

1. Corporation Name

HIGHSMITH LANDING DEVELOPMENT CORP.

Principal Place of Business

720 NORTH OCEAN STREET
JACKSONVILLE FL 32202

Mailing Address

720 NORTH OCEAN STREET
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1996

4. FEI Number

59-3362133

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 2502 Highsmith Landing Lane
Suite, Apt #, etc. 1200d. LANE

22 City & State

23 JACKSONVILLE FLA.

24 Zip 32226

25 Country DUVAL

2a. Mailing Address

26 2502 Highsmith Landing Lane
Suite, Apt #, etc.

27 City & State

28 JACKSONVILLE FL.

29 Zip 32226

30 Country DUVAL

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SHIELDS, RAYMOND T
STREET ADDRESS 720 NORTH OCEAN STREET
CITY-ST-ZIP JACKSONVILLE FL

TITLE VPSD
NAME LASSITER, WILLIAM T
STREET ADDRESS 720 NORTH OCEAN ST.
CITY-ST-ZIP JACKSONVILLE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SHIELDS, RAYMOND T.
1.2 NAME
1.3 STREET ADDRESS 2502 Highsmith Landing Lane
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32226

2.1 TITLE VPSD
2.2 NAME PAULINE SHIELDS
2.3 STREET ADDRESS 2502 Highsmith Landing Lane
2.4 CITY-ST-ZIP JACKSONVILLE F 32226.

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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.

SIGNATURE:

RAYMOND T SHIELDS
Raymond T Shields

2-3-98

(904) 714-2392

CR2E034 (10/97)