## FILE, NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000020178 (5)

LAKE NONA REAL ESTATE SERVICES, INC.

Incipal Place of Business	Mailing Address
NORTH EOLA DRIVE	215 NORTH EOLA DRIVE
LANDO FL 32801	ORLANDO FL 32801-2028

## **FILED** Apr 17 1997 8:00am Secretary of State



21       26       59-3366121       N         Suite, Apt. #, etc.       Suite, Apt. #, etc.       5. Certificate of Status Desired       \$8.75         22       City & State       6. Election Campaign Financing       \$5.00	applied For lot Applicable Additional Required May Be to Fees
ORLANDO FL 32801  ORLANDO FL 32801-2028  3. Date Incorporated or Qualified O3/05/1996  N/A  2. Principal Place of Business  2a. Mailing Address  25. Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip	applied For lot Applicable Additional Required May Be to Fees
2. Principal Place of Business  3. Principal Place of Business  4. Fet Number  5. Certificate of Status Desired  5. Principal Place of Business  5. Certificate of Status Desired  6. Election Campaign Financing  7. Trust Fund Contribution  6. Election Campaign Financing  7. Trust Fund Contribution  6. Election Campaign Financing  7. Trust Fund Contribution  7. Trust Fund Contribution  8. This corporation has liability for intangible tax under series  8. This corporation has liability for intangible tax under series  9. Name and Address of Current Registered Agent  9. Name and Addr	applied For lot Applicable Additional Required May Be to Fees
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 2. Country 2. Description Comparing Financing Trust Fund Contribution Added Address of Current Registered Agent 3. This corporation has liability for intangible tax under a Florida Statules Yes No  9. Name and Address of Current Registered Agent 3. Name 3. Name 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 3. On Address of Current Registered Agent 3. Street Address (P.O. Box Number is Not Acceptable)	lot Applicable Additional Required May Be I to Fees
21 26 59-3366121 N Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	lot Applicable Additional Required May Be I to Fees
Suite, Apt. #, etc.  27  City & State  City & State  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	Additional Required May Be I to Fees
22   27   5. Certificate of Status Desired   Fee R	Required  May Be I to Fees
City & State  City & State  28  Trust Fund Contribution  Added  Zip  Country  25  29  30  Florida Statutes  Florida Statutes  Plorida Statutes  Florida Stat	I to Fees
28 Trust Fund Contribution Added  Zip Country Zip Country 8. This corporation has liability for intangible tax under second Florida Statutes Yes No  9. Name and Address of Current Registered Agent  GOFF, BARRY L 215 NORTH EOLA DRIVE  ORLANDO FL 32801  10. Name and Address of New Registered Agent  81 Name  Street Address (P.O. Box Number is Not Acceptable)	I to Fees
24 25 29 30 Florida Statutes Yes No Name and Address of Current Registered Agent  GOFF, BARRY L 215 NORTH EOLA DRIVE ORLANDO FL 32801	8. 199.032,
9. Name and Address of Current Registered Agent  GOFF, BARRY L 215 NORTH EOLA DRIVE ORLANDO FL 32801  10. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)	
GOFF, BARRY L 215 NORTH EOLA DRIVE ORLANDO FL 32801  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)	
215 NORTH EOLA DRIVE  ORLANDO FL 32801  82 Street Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32801	
<b>84</b> City <b>■ 85 7</b> (p	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
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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	registered
SIGNATURE Signature, typed or printed hand of legistered agent and title. Larphicable (NOTE: Registered Agent signature required when reinstateg) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12
TITLE D LETE 1.3 TITLE DP K Change	Addition
NAME SILVERTON, VIVIENNE  STREET ADDRESS 216 NORTH EOLA DRIVE  12 NAME SILVERTON, VIVIENNE 13 STREET ADDRESS 9801 Lake Nona Road	
CITY-ST-ZIP ORLANDO FL 32801 1.4 CITY-ST-ZIP Orlando, Florida 32827	
TILE D DELETE 2.1 TILE DVP K Change	Addition
NAME THAKKAR, RASESH H. 22 NAME THAKKAR, RASESH H.	
STREET ADDRESS 215 NORTH EOLA DRIVE 2.3 STREET ADDRESS 9801 Lake Nona Road	
CUY-SI-ZIP ORLANDO FL 32801 2.4 CHY-SI-ZIP Orlando, Florida 32827	
THLE D L. DELETE 3.1 THLE DTS V K Change	Addition
NAME VOSS, JEFFERSON R. 32 NAME VOSS, JEFFERSON R.	
STREET ADDRESS 215 NORTH EOLA DRIVE 33 STREET ADDRESS 9801 Lake Nona Road	
CITY-ST-ZIP ORLANDO FL 32801 34.CITY-ST-ZIP Orlando, Florida 32827	
TITLE DELETE Change	Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STHEET ADDRESS	
CITY-S1-ZIP 4.4 CITY-S1-ZIP	
THILE DELETE 5.1 TITLE VP Change	X Addition
NAME S.2 NAME ANDERSON, ROBERT E.	
STREET ADDRESS 9801 Lake Nona Road	
CITY-SI-ZIP Orlando, Florida 32827	
TITLE DELETE 6.1 TITLE Change	☐ Addition
NAME 6.2 NAME	
STREET ADDRESS G3 STREET ADDRESS	
CITY-ST-74P 6.4 CITY-ST-74P	

I do 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.

407-851-0001