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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000023675

FLORIDA LANDHOLDINGS, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90188 036 ***150.00



Principal Flace of Business Mailing Address P O BOX 152779 P O BOX 152779 TAMPA FL 33684-2779 TAMPA FL 33684-2779 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/13/1996 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business No: Applicable 26 59-3371598 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year intangible Country Zip Zip □No X Yes Personal Property Tax. 30 24 25 29 10. Name and Address of New Register ad Agent 9. Name and Address of Current Registered Agent 81 Name SHAW, BILL M 82 Street Address (P.O. Bok Number is Not Acceptable) 550 N REO STREET STE 300 TAMPA FL 33609-1065 83 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statites, 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. (NO E. Registered Agent signature required when reinstating Signature, typed or printed n ime of registered ager t and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. □ Addition ☐ DELETE 1.1 TITLE TITLE TERINO, JAMES L 12 NAME NAME 301 W 131 AVE 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL-33612 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE 2.2 NAME NAME TERINO, DAVID F 9350 KENTON ROAD 2.3 STREET ADDRESS STREET ADDRESS WESLEY CHAPEL FL 33544 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME NAME TERINO, CHRISTOPHER F 3.3 STREET ADDRESS 12400 N NEBRASKA AVE STREET ADDRESS 3.4. CITY-ST-ZIP **TAMPA FL 33612** CITY-ST-ZIP Change Addition Addition ☐ DELETE 4.1 TITLE TITLE ANTHONY J. TERING 4 2 NAME NAME 43 STREET ADDRESS 3512 CROOKER DR STREET ADDRESS SPRINGHILL FL 34607 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 51 TO E TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP C/TY-ST-ZIP

14. I here by 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 signa ure 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 trusteer empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if change 1, or on an attachment with an address, with all other like empowered.

SIGNATURE:

OFFICIER OR DIRECTOR