SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025845

LINCOLN HOMES DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address 2083 TIMUCHA TRAIL 2083 TIMUCUA TRAIL

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

07-29-1999 90024 023 ***550.00



NOKOKIS FL	34275		N		FL 34275									
									DO NOT WRIT	E IN THIS	SPACE		_	_
									3. Date Incorporated or Qualified 03/22/1996					
2 Principal	Place of Busin	ness	2a.	Mailing	Address				4. FEI Number		Appl	ied For	٦	
21					,				59-3376876			Not	Applicable	1
Suite, Apt. #, etc.				Suite.	Apt. #, etc.			-			\$8.7	-	iditional	┪
22			27						- 5Certificate of Status Desired -			Req		-1-
City & State				City & State					6. Election Campaign Financing		\$5.1	00 N	 lay Be	7
23			28	28					Trust Fund Contribution	304				ĺ
Zip		Country	201	Zip Cou			untro		8. This corporation owes the curre	nt vear				_
24		25	29			30			Intangible Personal Property.	,u	Yes	W	No.	
24	4 Name	and Address of Curre		tered A	gent	130	Т	_	10. Name and Address of New Ro	egistered /	Agent			
	\$1. 114					81	Name							
SIRINGER, RANDY J							82 Street Address (P.O. Box Number is Not Acceptable)						_	_
2083 TIMUCUA TRAIL								Street Add	ss (P.O. Box Number is Not Acceptable)					ļ
NOKOMIS FL 34275							83						_	\dashv
		- I					03							
							84	City	4		85 2	Zip Co	ode	7
										<u>FL</u>				_
11. Pursua	int to the provi-	sions of sections 607.050	2 and 60	7.1508	, Florida Statut	tes, the at	ove	-named corpo	ration submits this statement for the pu on's board of directors. I hereby accept	rpose of ch	anging it	s regi	stered	
office o	or registered a	gent, or both, in the State vith, and accept the oblig	ations of	na. Suci f. sectio	n change was n 607.0505, F	authorize Iorida Sta	tute:	y ine corporati S.	orts board or directors. Triefeby accept	ине аррон	illiserit as	s regi	316164	- }
SIGNATUR		,	,		,									Ì
SIGNATUR	Signature, typed	or printed name of registered age	ent and title i	f applicable	e. (f	YOTE: Regist	ered /	Agent signature req	uired when reinstating)	DATE				վ ճ
12.		OFFICERS A	ND DIRE	CTORS	3	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIREC	CTOR	S IN 12	CR2E034 (5/99)
TITLE	D				DELETE	1.1 T(TLE	-		l	Chan	ge [Addition	1
NAME	NAME SIRINGER, RANDY J						1.2 NAME							%
STREET ADDRESS 2083 TIMUCUA TRAIL							1.3 STREET ADDRESS							ĮΨ
CITY-ST-ZIP NOKOMIS FL 34275							1.4 CITY-ST-ZIP							
TITLE	1				DELETE	2.1 T					Chan	ige [Addition	
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TITLE					DELETE	5.1 TI	ITLE	-	-	Į.	Chan	ge	Addition	. }
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NAME						6.2 N	AME							
STREET ADDRES	s					6.3 S	TREE	TADDRESS						
CITY-ST-ZIP	-					6.4 C								
14 I hereby	certify that the	information supplied wit	h this filir	a does	not qualify for	the exem	ntior	n stated in sec	tion 119.07(3)(i), Florida Statutes. I furt	her certify t	hat the i	nform	ation	7
indicated an office	d on this annua er or director of	al report or supplementa	l annual . eceiver o	report is r truste	s true and acc e empowered	urate and	that	t my signature	shall have the same legal effect as if a quired by Chapter 607, Florida Statutes	nade unde	roatn; tr	natta	ım	