

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

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90159 027 ***150.00

DOCUMENT # P96000043346

1. Corporation Name
LAKE COOK ROAD CORPORATION

Principal Place of Business
1801 HERMITAGE BLVD.
SUITE 600
TALLAHASSEE FL 32308

Mailing Address
1801 HERMITAGE BLVD.
SUITE 600
TALLAHASSEE FL 32308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/21/1996

4. FEI Number
59-3387925

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TODD, DAVID E
1801 HERMITAGE BLVD
SUITE 100
TALLAHASSEE FL 32308

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME BENNETT, DOUGLAS W
STREET ADDRESS 1801 HERMITAGE BLVD.
CITY-ST-ZIP TALLAHASSEE FL 32308

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Jeffrey L. Smith
1.3 STREET ADDRESS 1801 Hermitage Blvd., Suite 600
1.4 CITY-ST-ZIP Tallahassee, FL 32308

TITLE DVAS ☐ DELETE
NAME HORTON, JAMES W
STREET ADDRESS 1801 HERMITAGE BLVD.
CITY-ST-ZIP TALLAHASSEE FL 32308

2.1 TITLE V ☐ Change ☒ Addition
2.2 NAME Andrew R. St. Clair
2.3 STREET ADDRESS 3424 Peachtree RD, NE, Suite 800
2.4 CITY-ST-ZIP Atlanta, GA 30326

TITLE P ☐ DELETE
NAME DE COSTA, LALER
STREET ADDRESS 1150 LAKE HEARN DR NE SUITE 400
CITY-ST-ZIP ATLANTA GA 22

3.1 TITLE V ☐ Change ☒ Addition
3.2 NAME William J. Horvath
3.3 STREET ADDRESS 3424 Peachtree RD, NE, Suite 800
3.4 CITY-ST-ZIP Atlanta, GA 30326

TITLE V ☒ DELETE
NAME RAGHAVAN, JAY
STREET ADDRESS 1150 LAKE HEARN DR NE SUITE 400
CITY-ST-ZIP ATLANTA GA 22

4.1 TITLE T ☐ Change ☒ Addition
4.2 NAME Patricia C. Snedeker
4.3 STREET ADDRESS 3424 Peachtree RD, NE, Suite 800
4.4 CITY-ST-ZIP Atlanta, GA 30326

TITLE VAS ☒ DELETE
NAME BRILL, LUANNE G
STREET ADDRESS 1801 HERMITAGE BLVD, SUITE 100
CITY-ST-ZIP TALLAHASSEE FL

5.1 TITLE S ☐ Change ☒ Addition
5.2 NAME Thomas A. McKean
5.3 STREET ADDRESS 3424 Peachtree RD, NE, Suite 800
5.4 CITY-ST-ZIP Atlanta, GA 30326

TITLE S ☒ DELETE
NAME HARRINGTON, EVELYN
STREET ADDRESS 1150 LAKE HEARN DR NE SUITE 400
CITY-ST-ZIP ATLANTA GA 22

6.1 TITLE VAT ☐ Change ☒ Addition
6.2 NAME Luanne K. Good
6.3 STREET ADDRESS 1801 Hermitage Blvd., Suite 600
6.4 CITY-ST-ZIP Tallahassee, FL 32308

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, on an attachment with an address, with all other like empowered.

SIGNATURE:

Douglas W. Bennett, Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-14-99 850-488-4406

Daytime Phone #

CR2E034 (11/98)