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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000064342 (4)

LAND AND WATER AMENITIES, INC.

Principal Place		Mailing Address P.O. BOX 617047							
ORLANDO F	L 32611	ORLANDO FL 32861 US				DO NOT WRITE IN THIS SPACE			
		00				3. Date Incorporated or Qualified			
						07/31/1996			
2. Principal F	Place of Business	2a. Mailing Address				4, FEI Number		Applie	ed For
21		26				59-3393075		Not A	pplicable
Suite, Apt.	#, e1c.	Suite, Apt. #, etc.				6. Certificate of Status Desired	\$8.	75 Add	itional
22		27				6. Certificate or Status Desired		ee Requi	
City & Stat	e	City & State				6. Election Campaign Financing	\$5	.00 Ma	y Be
23		28				Trust Fund Contribution	Ad	ded to F	998
Zip	Country	Zip	-	intry	,	8. This corporation owes or has paid the			
24	25 9. Name and Address of Current	29	30	,		Personal Property Tax due June 30.	Yes	N	0
-		Hegistered Agent		81	Name	10. Name and Address of New Register	ed Agent		
	HRISTISON, JOHN GILL BO WILKINSON STREET			"	INAILLE				
			82	Street Addr	ress (P.O. Box Number is Not Acceptable)				
ORLANDO FL 32803				83					·
				83					
				84	City		85	Zip Cod	ie
		1007 1000 5: 11 0		Ш	<u> </u>	F			
SIGNATURE	Signature, typed or printed name of registered agents	and lite if applicable (NOTE	E: Registere			oration submits this statement for the purposition's board of directors. I hereby accept the a code when reinstains) DATI	E		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	P	DELETE	1.1 T)	TLE			Cha	nge _	_ Addition
NAME	CHRISTISON, JOHN G		1.2 N	AME					
STREET ADDRESS	830 WILKINSON STREET		1.3 51	REET	ADDRESS				
CITY-ST-ZIP	ORLANDO FL	·	1.4 CI	TY-S	7-ZIP				
TITLE	VPST	DELETE	2.1 Ti	TLE			Cha	nge L	Addition
NAME	POPSIL, JERALD B		2.2 N	AME					
STREET ADDRESS	2709 MIDSOMMER DRIVEA		2.3 S1	REET	ADDRESS				
CITY-ST-ZIP	WINDERMERE FL		2.40	ITY-S	ST-ZIP				
TITLE		☐ DELETE	3.1 TI	TLE			L Cha	nge L	Addition
NAME			3.2 N	ME					
STREET ADDRESS			3.3 ST	REET	ADDRESS				
CITY - ST - ZIP			3.4. C		ST - ZIP				
TITLE		☐ DELETE	4.1 TI				L Cha	nge L	_ Addition
NAME			4.2 N	AME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP		D 55, 50-	4 4 C		T-ZIP		 _		3
TITLE		☐ DELETÉ	5.1 Til	ILF	ľ		☐ Chai	nge	Addition

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 on some 4 to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, do on an altraphenor with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 City-ST-ZIP

TRAPET & TREASIL 1.

1-7-98

Change

Addition

FILED

Jan 15 1998 8:00am

Secretary of State

CICNIATUDE.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

CR2E034 (10/97)