

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

FILED
May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000064425 (7)

1. Corporation Name

MAGNOLIA VERANDA, INC.

Principal Place of Business

Mailing Address

1100 PARK CENTRAL BOULEVARD, SOUTH
SUITE 1700
POMPANO BEACH FL 33064

1100 PARK CENTRAL BOULEVARD, SOUTH
SUITE 1700
POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/31/1996

4. FEI Number

65-0687167

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 3087 E COMMERCIAL

Suite, Apt. #, etc.

22 BLVD

City & State

23 FT LAUDERDALE, FL

Zip

24 33308

Country

2a. Mailing Address

26 40 ROBERTSON

Suite, Apt. #, etc.

27 P O BOX 936457

City & State

28 POMPANO BEACH, FL

Zip

29 33073-6457

Country

9. Name and Address of Current Registered Agent

ROBERTSON, KAREN W
1100 PARK CENTRAL BOULEVARD, SOUTH
SUITE 1700
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name DARLENE SWAN
82 Street Address (P.O. Box Number is Not Acceptable)
3087 E COMMERCIAL BLVD
83
84 City FT LAUDERDALE FL 85 Zip Code 33308

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

Darlene Swan

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-98

12. OFFICERS AND DIRECTORS

TITLE D
NAME ROBERTSON, KAREN W
STREET ADDRESS 1100 PARK CENTRAL BLVD., SO., SUITE 1700
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE
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STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, S
1.2 NAME
1.3 STREET ADDRESS 3087 E COMMERCIAL BLVD
1.4 CITY-ST-ZIP FT LAUDERDALE, FL 33308

2.1 TITLE D, VP
2.2 NAME S. E. ROBERTSON, JR
2.3 STREET ADDRESS 3087 E COMMERCIAL BLVD
2.4 CITY-ST-ZIP FT LAUDERDALE, FL 33308

3.1 TITLE D, S
3.2 NAME DARLENE SWAN
3.3 STREET ADDRESS 3087 E COMMERCIAL BLVD
3.4 CITY-ST-ZIP FT LAUDERDALE, FL 33308

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, or on an attachment with an address.

SIGNATURE:

Darlene Swan

4-30-98 (454) 351-201031

CR2E034 (10/97)