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 # P96000065272 (2)

WALK IN WATER LAND SALES INC.

FILED Apr 17 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		E LOURINGER HIG FRANC BURN BONN BONN BONN BONN BONN BONN FOR BURN BONN BONN BONN BONN BONN BONN BONN BO
8912 OAKWOOD DRIVE	8912 OAKWOOD DRIVE		
LAKE WALES FL 83853	LAKE WALES FL 33853		DO NOT WRITE IN THIS SPACE
	•		3. Date Incorporated or Qualified
			08/05/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		NOT APPLICABLE Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Regulred \$8.75 Additional Fee Regulred
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Žip Country	Zip	Country	This corporation owes or has paid the current year lotangible
24 25	29 30	0	Personal Property Tax due June 30. 🔲 Yes 🔀 No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent			
KORSCHUN, ROBERT S			Robert Oneppara
28 W FLAGLER STREET		62 Stree	et Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33130		83	8812 Oalwood UI)
		84 City	Late 1,46/2 FL 1871 282853
11. Pursuant to the provisions of Sections 607.050:	2 and 607 1508, Florida Statutes,	the above-name	ed corporation submits this statement for the purpose of changing its registered
agent. I am familiar with, and accept the obliga			orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE Signature, typed or printed name of a postered age	nd Kober	t Ship	and 4-18-98
Signiture. Typed or printed name of #ignifered agn 12. OFFICERS ANI		legislered Agent Egnal.	fure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE . D	DELETE	1.1 TITLE	Change MAddition
NAME SHEPPARD, DAVID C	_	1.2 NAME	Robert Sheppand
STREET ADDRESS 8929 SHEPPARD DRIVE		1.3 STREET ADDRESS	s 8812 Oakwood Dr
CITY-ST-ZIP LAKE WALES FL 33853		1.4 CITY-ST-ZIP	s 8812 Oakwood Dr Lake Wates Fl. 33853
TITLE	☐ DÉLETE	2.1 TITLE	D Change Addition
NAME		2.2 NAME	David Shuppard
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP	☐ DELETE	2.4 CITY-ST-ZIP	hake Wales F1. 33853
NAME	C DECEIE	3.1 TITLE 3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	S 4535 Walk In water Rd #14
CITY-ST-ZIP		3.4. CITY-ST-ZIP	Laki Walu F1. 33853
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	s l
CITY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	s [
CITY-ST-ZIP	The second	5 4 CITY-ST-ZIP	
THILE	DELETE	61 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	S
14. I hereby certify that the information supplied wi	ith this filing does not qualify for t	6.4 CITY-ST-ZIP he exemption sta	ated in Section 119.07(3)(i). Florida Statutes. I further certify that the information

indicated on this annual report or supplied with this mind does not down to indicated 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.