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 # P96000073834 (9)

LAUREL INTERCHANGE CORPORATION

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 îzulioni îib îbiri biri belir delli delli delli îibid î		
•							
1501 WATERFORD DRIVE 1501 WATERFORD DRIVE VENICE FL 34292 VENICE FL 34292							
72,000 70 7					DO NOT WRITE IN THIS SP	ACE	
					3. Date Incorporated or Qualified		
		1-2			09/05/1996		
305 0	lace of Business ommercial Court	26. Mailing Address 26 395 Commercia	1 00	·*+	4. FEI Number	Applied For	
21 395 C Suite, Apt.		Suite, Apt. #, etc.	11 00	YT L	65-0692398	Not Applicable	
22 SUite		27 Suite A			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & Stat	······································	City & State			6. Election Campaign Financing	\$5.00 May Be	
23 Venci		├	28 Venice FL		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Zip Country		8. This corporation owes or has paid the curre		
24 34292	25 USA	29 34292 30	o USA	A	(max	Yes 🗌 No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Aç	jent	
MILLER, MICHAEL W				1 Name			
45A4 WATERFORD DD				2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
VENICE FL 34292				395 Commercial Court			
				83 Suite A			
			8			85 27/03/C0de	
				venic		34292	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508/ forida 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 Blanch. Supply change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familia with, and accept the jubility of Section 607.0505, Florida Statutes.							
agent. I am familia with, and accept the obligations of Segren 607.0505, Florida Statutes.							
SIGNATURE) WHILL 18							
Signature: Typind or publied ratine of registered appint and tiffs it applit able (NOTE: Registered Agent signature required when reinstating) DATE							
12. TITLE	OFFICERS AND	DELETE DELETE	13.			Change Addition	
NAME	MILLER, MICHAEL W		1.2 NAMI			E Change Accuton	
	1501 WATERFORD DRIVE				395 Commercial Court, SUite		
STREET ADDRESS	VENICE FL 34292		1.4 CITY-		Venice, FL 34292	A	
CITY-ST-ZIP TITLE	D D	DELETE	2.1 TITLE			Change	
NAME	PARRISH, JAYNE E	—	2.2 NAMI	- 1	_		
STREET ADDRESS	1501 WATERFORD DRIVE				395 Commercial Court, Suite		
CITY-ST-ZIP	VENICE FL 34292		2.4 CITY		Venice, F1 34292	A	
TITLE	D	☐ DELETE	3.1 TITLE			Change Addition	
NAME	S MITH, MARK P	_	3.2 NAMI	.	Vice President ORECTOR Y	\ .	
STREET ADDRESS	1501 WATERFORD DRIVE				Timothy D. Miller		
CITY-ST-ZIP	VENICE FL 34292		3.4. CITY		395 Commercial Court Suite A		
TITLE		DELETE	4.1 TITLE		Venice, FL 34292	Change Addition	
NAME			4. 2 NAM	_E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		DELETE	5.1 TITLE		Ĺ	Change Addition	
NAME			5.2 NAMI	:			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			54 CITY	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAMI	:			
STREET ADDRESS			6.3 STRE	ET ADDRESS		ļ	
CITY-ST-ZIP			6.4 CITY	ST-ZIP			
4:	14 1	201 - 201 - 4 10 10 10 10 10 10 10 10 10 10 10 10 10			in Constant 440 000000 Florida Otal Anna I Confirm a rest	4	

4. 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 employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if planged, or on an attachment with an addition.

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