FIŁE 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

DOCUMENT # P96000087911

1. Corporation Name

LANDMARK ORGANIZATION INTERNATIONAL, INC.

Princ	opai Piac	e or	Busine	ess
1250	CAPITAL	ΩĒ	TEYAS	нісн

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

Mailing Address

AS HIGHWAY SOUTH BLDG 1. SUITE 100 AUSTIN TX 78746

1250 CAPITAL OF TEXAS HIGHWAY SOUTH BLDG 1. SUITE 100

AUSTIN TX 78746

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90005 007 ***150.00



Applied For

\$8.75 Additional

Fee Required

\$5 00 v-...

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 10/24/1996

5. Certifcate of Status Desired

4. FEI Number

74-28 10895

23 28							rust Fund			,a 🗀			ided to	Fees	
Zip	Country	Zip	Co	untry			8. TI	his corpo	ration ov	ves the c	urrent yea	r Inta	ngible		
24	25	29	30			P	ersonal P	roperty	Tax.			☐ Ye	5	□No	
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent								
				81	Na	ame									
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				82	Street Address (P.O. Box Number is Not Acceptable)										
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				83									_		
				84	Ci					_			85	Zip C	ode
	•			1 1	1	•						FL		•	
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida Sta	tutes, the a	pove	e-na	med corpor	ration s	submits th	is staten	nent for t	he purpos	e of c	hangi	ng its r	egistered
office or agent. I	registered agent, or both, in the State of am familiar with, and accept the obligation	Florida. Such change was ons of, Section 607.0505, I	s autnorize Florida Sta	a by lutes.	tne :	corporation	ıs boar	ra or airea	gors. i ne	ereby ac	cept the a	ppom	unen	as reg	istered
SIGNATURE	, ,														
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NO	TE. Registere	d Agen	it sign	ature required w	when reins	stating)			DAT	E			
12.	OFFICERS AND		13.				AD	DITIONS	CHANG	ES TO	OFFICER	S AND			
TITLE	D			πE		1							Ch	ange	☐ Addition
NAME				I.2 NAME											
STREET ADDRESS 1250 CAPITAL OF TEXAS HWY S, STE 100 1.3			1.3 S	3 STREET ADDRESS							ļ				
CITY-ST-ZIP	0111 01 211 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1.4 CITY-ST-ZIP											
TITLE	1250 Capital of Texas Bldg 1-100 Austin, TX 78746 President 22 23			2.1 TITLE 2.2 NAME									Ch	ange	Addition
NAME															ĺ
STREET ADDRESS				TREET	FADDI	RESS									}
CITY-ST-ZIP				2.4 CITY-ST-ZIP						_					
TITLE	Jenkins, Donna	☐ DELETE	3.1 7	ME									Ch	ange	☐ Addition
NAME				3.2 NAME											1
STREET ADDRESS	Austin, TX 78746 Secretary 33.8		3.3 STREET ADDRESS												
CITY-ST-ZIP			3.4. (3.4. CITY-ST-ZIP											
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NAME			4.21	IAME											
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TITLE		☐ DELETE	5.1 T										☐ Ch	ange	☐ Addition
NAME	<u> </u>		5.2 N	AME		1									1
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CITY-ST-ZIP			5.4 0	(TY-ST	T-ZIP										
TITLE		☐ DELETE	6.1 T	ITLE									Ch	ange	☐ Addition
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CITY-ST-ZIP			6.4 0	ITY-ST	T-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, with all other like empowered.

SIGNATURE: 也

CR2E034 (11/98)