

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED
AND
FILED

1998 SEP -2 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000098338 (2)**

1. Corporation Name

LYN L. BURRELL CORPORATION

Principal Place of Business

**806 N FEDERAL HWY
POMPANO BEACH FL 33062
US**

Mailing Address

**806 N FEDERAL HWY
POMPANO BEACH FL 33062
US**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**BURRELL, ROBERT E
588 EAST WOOLBRIGHT ROAD #207
BOYNTON BEACH FL 33435**

3. Date Incorporated or Qualified

12/02/1996

4. FEI Number

65-0711528

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

BURRELL, LYN L

STREET ADDRESS

588 E WOOLBRIGHT RD #207

CITY-ST-ZIP

BOYNTON BEACH FL

☐ DELETE

TITLE

VP

NAME

BECKER, BRENDT

STREET ADDRESS

34 GLEASON STREET

CITY-ST-ZIP

DELRAY BEACH FL

☐ DELETE

TITLE

ST

NAME

BURRELL, BOB

STREET ADDRESS

588 EAST WOOLBRIGHT RD #207

CITY-ST-ZIP

BOYNTON BEACH FL

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TITLE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

☐ Change ☐ Addition

800002635186--4

-09/09/98--01043--005

******150.00 ****150.00**

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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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SCC 9-8-98

7/6/98

954-943-1055

CR2E034 (5/98)

2



AUGUST 31, 1998

MR. SAM CALDWELL,
SUPERVISOR
DIVISION OF CORPORATIONS
POST OFFICE BOX 6327
TALLAHASSEE, FLORIDA 32314

DEAR MR. CALDWELL:

PLEASE BE ADVISED THAT UNDER THE CORPORATION NAME OF
LYN L. BURRELL CORPORATION THE DOCUMENT # P96000098338 WAS NOT
RECEIVED. OUR ACCOUNTANT WAS DISMISSED SOME MONTHS AGO.
THEREFORE I WAS NOT APPRISED OF THE SITUATION.

I AM ENCLOSING CHECK NUMBER 1902 IN THE AMOUNT OF \$150.00. PLEASE
ABATE ALL PENALTIES.

VERY TRULY YOURS,

LYN L. BURRELL
LYN L. BURRELL CORPORATION
FEI # 65-0711528

ENCLOSURE - 2

A COMPLETE DECORATOR CENTER

