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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000016422 (2)

C&R LAND DEVELOPMENT, INC.

Principal Place of Business		Mailing Address	Mailing Address		I DEGLIGAL DIN INDIA ENDAL MONIA NOVIA NOVIA NOVIA NOVIA	(BIB 81111 81818 11818 1181 1831
611 NORTH WYMORE ROAD WINTER PARK FL 32789		611 NORTH WYMORE ROAD WINTER PARK FL 32789		DO NOT WRITE IN THIS SPACE		
					<ol> <li>Date Incorporated or Qualified</li> <li>02/20/1997</li> </ol>	
Principal Place of Business     Substitute       Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-3444738	Applied For Not Applicable	
Suite, Apt. #, etc. 22		Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	7(p	Gountr 30	у	This corporation owes or has paid the c Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registere	d Agent
	LL, WILLIAM C		81	Name		
	I <b>NO</b> RTH WYMORE ROAD VTER PARK FL 32789		82		dress (P.O. Box Number is Not Acceptable)	
			83			85 Zip Code
·			0	City	F	L 63 Zip Code
office or r	to the provisions of Sections 607.0: egistered agent, or both, in the Starm familiar with, and accept the obt	te of Florida. Such chanc	ie was authorized b	ov the corpor	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ag	of changing its registered opointment as registered
OIGHTATORIE	Signature, typod or printed name of regelered a	igent and tille if applicable	(NOTE: Registered Ac	gent signature req	nired when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF	
TITLE		☐ DEL		1 -	DIRECTOR, SECRETAR	Change Lakeddition
NAME			1.2 NAME	1 1	KOLL WILLIAM THE	, '
STREET ADDRESS				T ADDRESS	WIL N. WYMORE K	3 - 740
CITY-\$T-ZIP				ST-ZIP		32769
TITLE		L_ DELETE 21		I I	DIRECTOR PRESIDENT	Change Addition
NAME			2.2 NAME		LAYTON, CHARLES	$\Psi_{i}$ , $\mu c$
STREET ADDRESS					2250 LEE ROAD,	7120
CITY-ST-ZIP TITLE		DEL	2. 4 CITY - ETE 3.1 TITLE	- ST - ZIP	WINTER PARK, AL	Change Addition
			3.2 NAME			C Orango C Material
NAME ATORET ABORESE				T ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP TITLE		DEL	.ETE 4.1 TITLE	· 51-ZIP		Change Addition
			4. 2 NAMI	:		_ the go _ the term
STREET ADDRESS	, 5 % <b>%</b> •	• • •	B C	T ADDRESS		
			4.4 CITY-			
CITY-ST-ZIP TITLE	W-	DEL		31-7IF		Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	1		
TITLE		DEL		Q1 A17		Change Addition
NAME			6.2 NAME			
STREET ADDRESS				1 ADDRESS		

64 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 suppliemental annual report is thrue 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 enhancement of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, providing the manual directors.