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 #
1. Corporation Name P97000075791 (8)

MINCY LAND & TIMBER, INC.

FILED Jun 04 1998 8:00am Secretary of State



:								
Principal Place of Business Mailing Address				I KOON ADIN BONK BOKK OOKK I	ead i diiki laala la	ili iili illi		
US 19 SOUTH & PADGETT FID US 19 SOUTH & PADGET P O BOX 422 P O BOX 422 PERRY FL 32348 PERRY FL 32348		ETT RD		3. Date Incorporate	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/02/1997			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		aA	plied For	
21	26			59-346	6736		t Applicable	
Suite, Apt. #, etc.	hand the state of			5. Certificate of Sta	tus Desired	\$8.75 /		
City & State				B. Stanking Common	- Financia	Fee Re		
23	<u>⊢</u> '	28		6. Election Campaig	· · · · ·	\$5.00 Added to		
Zip Country	Zip	Cou	ntry	8. This corporation	owes or has paid the c			
24 25	29	30			y Tax due June 30.] No	
9, Name and Address of Current	Hegistered Agent		81 Nam	10. Name and Addr	ess of New Registered	d Agent		
MINCY, JIMMY R JR US 19 SOUTH & PADGETT RD								
PERRY FL 32347			82 Stre	Street Address (P.O. Box Number is Not Acceptable)				
1 1 1 1 2 3 2 3 1 1			63					
			84 City			85 Zip (Code	
					<u>F</u> [
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation 	f Florida, Such change was	authorize	d by the c					
SIGNATURE								
Signature typed or presed name of regularized agent 12. OFFICERS AND		TE Registere	1 Agent signa	required when reinstating)	DATE NGES TO OFFICERS AN	ID DIRECTOR	S IN 12	
TITLE D	DELE 1E	1.1 1/	rle	ADDITIONATION	IGES TO OTT TOLLTO AT	Change	Addition	
NAME MINCY, JIMMY R JR		1.2 N/	ME					
STREET ADDRESS RT 1, BOX 546		1.3 STREE						
CITY-ST-ZIP PERRY FL 32347	·	1.4 CI	TY-ST-ZIP					
TITLE D	DELETE	2.1 71					Addition	
NAME MINCY, MICHAEL W		2.2 NAM		1				
STREET ADDRESS 641 FRANKS FAIR LANE PERRY FL 32347			REET ADDRES					
CITY-ST-ZIP FERRY FL 32347	DELETE	2. 4 U	TY-ST-ZIP			Change	Addition	
NAME	LLI WITCH	3 2 N/		ı		omingo	المارات المارا	
STREET ADDRESS			reet addres					
CITY-ST-ZIP		3.4. C	TY+ST-ZIP)	
TITLE	☐ DELETE	4.1 T(LE.			Change	Addition	
NAME		4. 2 N	AME	1				
STREET ADDRESS		4.3 ST	REET ADDRES					
CITY-ST-ZIP	Dougra		Y-ST-ZIP			1 0	4495	
TITLE	☐ DELFTE	5.1 TI				☐ Change	Addition	
NAME		5.2 N/						
STREET ADDRESS			REFT ADDRES					
CITY - ST - ZIP	DELETE	6.1 TI	IY-ST-ZIP LE			Change	Addition	
NAME		6.2 NA		1				
STREET ADDRESS			RFET ADDRES					
CITY-ST-ZIP			Y-S1-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 yustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

5-29-98 RD-584-6453