

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000081500

1. Entity Name

LAGUNA LANDING DEVELOPMENT, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90162 029 ***150.00

Principal Place of Business

Mailing Address

600 S. BARRACKS ST., STE. 210
PENSACOLA FL

600 S. BARRACKS ST., STE. 210
PENSACOLA FL 32501-6043

C0006272



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4 LAGUNA STREET

3. Mailing Address

4 LAGUNA STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 201

SUITE 201

City & State

FWB FLA

City & State

FWB FLA

4. FEI Number

59-3474343

Applied For

Not Applicable

Zip

32540

Country

USA

Zip

32540

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHWEIZER, WILLIAM T
866 SANTA ROSA BLVD
FT WALTON BEACH FL 32548

7. Name and Address of New Registered Agent

Name

SCHWEIZER, WILLIAM T.

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

4 LAGUNA STREET

Suite, Apt. #, etc.

SUITE 201

City

FWB

FL

Zip Code

32540

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS SCHWEIZER, WILLIAM T
CITY-ST-ZIP 866 SANTA ROSA BLVD
FT WALTON BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS SCHWEIZER, WILLIAM T.
CITY-ST-ZIP 4 LAGUNA STREET SUITE 201
FWB FLA 32540

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-2000

Date

980 301079

Daytime Phone #

CR2E034 (9/99)