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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Jun 25 1998 8:00am

Secretary of State

•	1998	DIVISION OF CO	DRPORATIONS	Joordan	ly of State
	MENT # P9700 F LAKELAND, INC.	00097558 (5)			
Principal Place of Business		Mailing Address		{	
2000 EAST EDGEWOOD DRIVE NO. 214 LAKELAND FL 33803		2000 EAST EDGEWOOD DRIVE NO. 214 LAKELAND FL 33803			
				DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
2. Principal Place of Business		2a. Mailing Address		11/13/1997 4. FEI Number	Applied For
21		26		59-3495214	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	7 _{(p}	Country	Trust Fund Contribution L 8. This corporation owes or has paid	Added to Fees the current year intangible
24	25		30	Personal Property Tax due June 30	Yes 🔀 No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Regis	itered Agent
MICKEEL, SETH D JR 2000 EAST EDGEWOOD DRIVE			<u> </u>	(CO. D. A) (
	. 214		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
LAKELAND FL 33803			83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.09	02 and 607.1508, Florida Statules	s, the above-named con	poration submits this statement for the purp	pose of changing its registered
l office or n	<mark>egister</mark> ed agent, or both, in the Stat m fami bar with, and accept the obli	le of Florida. Such change was au	ithorized by the corpora	lion's board of directors. I hereby accept the	no appointment as registered
SIGNATURE					DAIL
12.	Structure typical or printed name of registers to OFFICERS A	ND DIRECTORS	flegistered Agent signature requi	ADDITIONS/CHANGES TO OFFICER	
TITLE	D	DILLETE	1.1 TITLE		Change Addition
NAME	MCKEEL, S. DOUGLAS		1.2 NAME		
STREET ADDRESS	2000 EAST EDGEWOOD DE	RIVE, NO 214	1.3 STREET ADDRESS		
CITY-S1-ZIP TITLE	LAKELAND FL 33803	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	MCKEEL, SETH D JR		22 NAME		
STREET ADDRESS	2000 EAST EDGEWOOD DE	RIVE. NO 214	2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33803		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-S1-ZIP 4.1 TITLE		Change Addition
NAME			4 2 NAME		_ • -
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - 7IP		
TITLE		□ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		La Mille	6.2 NAME		C Samuel C Francisco
STREET ADDRESS			63 STHEET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		

14. Thereby 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 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