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Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90046 046 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000010811

1. Corporation Name
LANDS' END ANTIQUES, INC.



Principal Place of Business
3634 S DIXIE HIGHWAY
WEST PALM BEACH FL 33405

Mailing Address
3634 S DIXIE HIGHWAY
WEST PALM BEACH FL 33405

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 **3634 S DIXIE HIGHWAY**
Suite, Apt. #, etc.
22
City & State
23
Zip **Country**
24 **25**

2a. Mailing Address
26 **LEONARD H. LONG**
949 PASEO PALMERA
WEST PALM BEACH, FL 33405
27
City & State
28
Zip **Country**
29 **30**

3. Date Incorporated or Qualified
02/03/1998

4. FEI Number
65-0810353

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 the current year intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WAGNER, ROBERT
3634 S DIXIE HIGHWAY
WEST PALM BEACH FL 33405

10. Name and Address of New Registered Agent

81 Name
LEONARD H. LONG
 82 Street Address (Number and Street Name) **949 PASEO PALMERA**
 83 **WEST PALM BEACH, FL 33405**
 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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	WAGNER, ROBERT	
STREET ADDRESS	914 N FEDERAL HWY #4	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	D	☐ DELETE
NAME	LONG, LEONARD	
STREET ADDRESS	4492-A MELVIN ROAD	
CITY-ST-ZIP	LAKE WORTH FL 33481	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	WEST PALM BEACH, FL 33405
2.3 STREET ADDRESS	949 PASEO PALMERA
2.4 CITY-ST-ZIP	LEONARD H. LONG
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	LEONARD H. LONG
3.3 STREET ADDRESS	949 PASEO PALMERA
3.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33405
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	LEONARD H. LONG
4.3 STREET ADDRESS	949 PASEO PALMERA
4.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33405
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(l), 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 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

Date

Daytime Phone

561-655-1962

CR2E034 (11/98)