

FILED
Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90004 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
1999			
DOCUMENT # P98000023033			
1. Corporation Name LYTTON & ASSOCIATES, INC.			
Principal Place of Business 120 NORTH AZALEA TERRACE INVERNESS FL 34450		Mailing Address P O BOX 245 INVERNESS FL 34451-0245	
DO NOT WRITE IN THIS SPACE			
3. Date Incorporated or Qualified 03/10/1998			
2. Principal Place of Business		4. FEI Number 59-3510498	
21	2a. Mailing Address	Applied For Not Applicable	
Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
22	2b. Mailing Address	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
City & State		7. This corporation owes the current year intangible Personal Property Tax. ☒ Yes ☐ No	
23	2c. Mailing Address	8. Name and Address of Current Registered Agent	
City & State		9. Name and Address of New Registered Agent	
24	2d. Mailing Address	10. Name and Address of New Registered Agent	
Zip		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.	
Country		12. SIGNATURE	
25		13. OFFICERS AND DIRECTORS	
26		14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
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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 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: *David Wright* PRESIDENT 3-16-99 (352) 726 0066
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Edwin H. Lytton 4/5/99 352-726-0066

CR2034 (1/98)