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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000034186

1. Corporation Name

E.H. EGRETS LANDING, INC.

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90113 007 ***150.00



Principal Place of Business Mailing Address							1			Elig Eiri inn!
•	IAN BLVD STE 1118	1155 S SEMORAL	1155 S SEMORAN BLVD STE 1118 WINTER PARK FL 32792							
***************************************	. •							IOT WRITE IN THIS	SPACE	
							3. Date Incorporated or 04/15/1998	Qualifed		
- 5: : (5	(B)	O Mailing Adds					4. FEI Number		Ant	olied For
<u> </u>	lace of Business	2a. Mailing Addr	255				59- <u>35</u>	06690	Not	Applicable
Suite, Apt.	# ptc		Suite, Apt. #, etc.						\$8.75 A	
22	m, etc.	27					5. Certifcate of Status D	esired	Fee Red	
City & Stat	te ·	City & State					6. Election Campaign Fi	nancing	\$5.00	May Be
23		28	28				Trust Fund Contributi	on	Added to	Fees
Zip	Country	Zip	Zip Country				8. This corporation owe	s the current year In	tangible	_
24		29					Personal Property Ta			MNo
	9. Name and Address of Currer	nt Registered Agent					10. Name and Address	of New Registered	Agent	
OTE	OLIANI DEINILADD C			81	Nan	ne				
STEPHAN, REINHARD G 2699 LEE ROAD STE 540				82	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)			
	TER PARK FL 32789									
				04	0:5-				85 Zip C	`ode
				84	City			FL	-	
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Flori	da Statutes, th	ne above	-nam	ed corpo	ration submits this stateme	nt for the purpose of	f changing its	registered
office or a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such chan ations of, Section 607.	ge was aumor 0505, Florida S	ized by Statutes	ine co	rporation	15 board of directors, 1 fier	eby accept the appo	municin da rog	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SIGNATURE										\
SIGNATURE	Signature, typed or printed name of registered age		(NOTE: Regis	stered Ager	ıt signatı	re required	when reinstating)	DATE		
12.			13.		1.1-	ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTO Change	RS IN 12	
TITLE	- TVIO			1.1 TITLE		77	2		Z Change	
NAME	TEPLITSKY, LILIAN			1.2 NAME						
STREET ADDRESS	1100 O CEMOTAN BEID OIL 1710			1.3 STREE		SS				
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TITLE	D	[] U		2.1 TITLE					☐ Criange	
NAME	TEPLITSKY, LILIAN			2.2 NAME						J
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TITLE	<u> </u>			4. 2 NAME						_
NAME				4.3 STREE	7 40000					
STREET ADDRESS	1			4.4 CITY-S		۵				1
CITY-ST-ZIP TITLE				5.1 TITLE	1- EIF		· · ·		☐ Change	Addition
NAME	į			5.2 NAME						
STREET ADDRESS				5.3 STREE	TADDRE	ss				
CITY-ST-ZIP	[5.4 CITY-S	T- ZIP					
TITLE			ELETE	6.1 TITLE					Change	Addition
NAME		_		6.2 NAME						
STREET ADDRESS	5		1	6.3 STREE	T ADDRE	ss				

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 port 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 of the corporation of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation of the receiver of the corporation of the corporat

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER