PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Katherine Harris

DOCUMENT # P98000045524

Suite, Apt. #, etc.

FLORIDA LAND AUCTIONS, INC.

Mailing Address		
2645 HWY. 98 W. Mary Esther Fl. 32569		
	2645 HWY. 98 W.	

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Suite, Apt. #, etc.

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90161 007 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Not Applicable

3. Date Incorporated or Qualifed

59-3513242

5. Certifcate of Status Desired

05/18/1998 4. FEI Number

22		27					ree Required		
City & State	e .	F	City & State				6. Election Campaign Financing Trust Fund Contribution Added to Fees		
23		28							
Zip	Country	\vdash	Zip		intry		8. This corporation owes the current year Intangible Personal Property Tax		
24	25	29		30			Totalian Topony Tax		
	9. Name and Address of Curre	ent Regis	tered Agent		041	A)	10. Name and Address of New Registered Agent		
1504	ACMERIA CHOLLAND III				81	Name			
JESMONTH, RICHARD E 217 A. E. INTENDENCIA ST.					82	Street A	ddress (P.O. Box Number is Not Acceptable)		
							<u></u>		
PENSACOLA FL 32501					83				
					84	City	85 Zip Code		
						•	FL		
office or re agent. I as	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	a of Hori	ia. Such change was a	utnonze	ועמים	tne corbor	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered ag	gent and title	if applicable. (NOTE	Registere		t signature req	quired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS						ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D		☐ DELETE	1.1 T	TLE		☐ Change ☐ Addition		
NAME	HERING, STEVE			1.2 N	AME	ļ			
STREET ADDRESS	2645 HWY. 98 W.			1.3 S	TREET	ADDRESS			
CITY-ST-ZIP	MARY ESTHER FL 32569			1.4 C	ITY-ST	r-ZIP			
TITLE			DELETE	2.1 T	ITLE		☐ Change ☐ Addition		
NAME				2.2 N	AME	Į			
STREET ADDRESS				2.3 S	TREET	ADDRESS	•		
CITY-ST-ZIP				2.40	ITY-S	T-ZIP			
TITLE	-		DELETE	3.1 T	MLE		☐ Change ☐ Addition		
NAME				3.2 N	AME				
STREET ADDRESS				3.3 \$	TREET	ADDRESS			
CITY-ST-ZIP				3.4. (CITY-S	T-ZIP			
TITLE			☐ DELETE	4.† T	NLE		Change C Addition		
NAME				4.21	IAME				
STREET ADDRESS				4.3 S	TREET	ADDRESS			
CITY-ST-ZIP				4.4 0	ITY-ST	r∙ziP			
TITLE			DELETE	5.1 T	ITLE		☐ Change ☐ Addition		
NAME				5.2 N	AME	-			
STREET ADDRESS				5.3 S	TREET	ADDRESS			
CITY-ST-ZIP				5.4 0	ITY-ST	r-zip			
TITLE			[] DELETE	6.1 T	ΠLE		☐ Change ☐ Addition		
NAME				6.2 N	AME				
STREET ADDRESS				6.3 9	TREET	ADDRESS			
CITY-ST-ZIP	<u> </u>			6.4 0	:ITY-S1	T-ZIP			
14 I hereby o	cortify that the information supplied	with this f	iling does not qualify fo	r the exe	mnti	on stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information		

native venus that the information supplied with this limit does not quality for the exemption stated in Section 1.19.07(3)(f), Florida Statutes. I number certify that the information indicated on this annual report or suppliemental 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 acceptance with an address, with all other like empowered.