

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000077007

1. Entity Name  
PLACID VIEW PROPERTIES, INC.



Principal Place of Business

172 E INTERLAKE BLVD  
LAKE PLACID, FL 33852

Mailing Address

172 E INTERLAKE BLVD  
LAKE PLACID, FL 33852

FILED

07 MAY -9 PM 3:23

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA



01262007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0948340

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NIELANDER, WILLIAM J  
172 E. INTERLAKE BLVD  
LAKE PLACID, FL 33852

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIELANDER, WILLIAM J 500 BEAR RD LAKE PLACID, FL 33852
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300103099219  
05/23/07--01019--015 \*\*450.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ Date: 4/27/07 Daytime Phone # \_\_\_\_\_