

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 07 1997 8:00am  
Secretary of State

DOCUMENT # S08489

(4)

1. Corporation Name

SOUTHLAND PROPERTY MANAGEMENT, INC.



Principal Place of Business

8488 NORTH LOCKWOOD RIDGE RD  
SUITE 327  
SARASOTA FL 34243

Mailing Address

8488 NORTH LOCKWOOD RIDGE RD  
SUITE 327  
SARASOTA FL 34243-2951

3. Date Incorporated or Qualified  
10/23/1990

3a. Date of Last Report  
03/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number  
59-3035667

Applied For  
Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WATTS, ROBERT A  
7019 12TH CT., E  
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name Alex H. Lucchesi

82 Street Address (P.O. Box Number is Not Acceptable)  
6033 34th. St. W., #113

83

84 City Bradenton

FL

85 Zip Code 34210

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 Alex H. Lucchesi, Alex H. Lucchesi, President

1/12/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S ☒ DELETE  
NAME HARGEN, ROBERT  
STREET ADDRESS 803 134TH ST E  
CITY-ST-ZIP BRADENTON FL

TITLE P ☒ DELETE  
NAME WATTS, ROBERT  
STREET ADDRESS 7019 12TH ST CT E  
CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 P/T ☒ Addition  
1.2 NAME Alex H. Lucchesi  
1.3 STREET ADDRESS 6033 34th. St. W. #113  
1.4 CITY-ST-ZIP Bradenton, FL 34210

2.1 TITLE V ☒ Addition  
2.2 NAME Klaus Doran  
2.3 STREET ADDRESS 5349 Castleman Dr.  
2.4 CITY-ST-ZIP Sarasota, FL 34232

3.1 TITLE S ☐ Change ☒ Addition  
3.2 NAME Francis Doran  
3.3 STREET ADDRESS 7420 Oak Run Lane  
3.4 CITY-ST-ZIP Sarasota, FL 34243

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

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 do 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.

SIGNATURE Alex H. Lucchesi

1/12/97

044-227-2630

CR2E034 (9/96)