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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S60634

(0)

LAND HOLDINGS, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 918A DREW STREET 1442 LINHART AVE. FT. MYERS FL 33902 CLEARWATER FL 34615 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/17/1991 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3117465 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П 28 Trust Fund Contribution Added to Fees Zip Ζφ Country Country This corporation owes or has paid the current year Intangible X Yes □ No 24 25 29 33755 9. Name and Address of Current Registered Agent 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 Name GRESHAM GREGORY L. 918A DREW STREET Street Address (P.O. Box Number is Not Acceptable) 83 **CLEARWATER FL 34615** 84 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of regulatorid agent and fit of applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition TITLE 1.1 TITLE MERCURIO, SUSAN M. NAME 1.2 NAME **19 JACKSON AVENUE** STREET ADDRESS 1.3 STREET ADDRESS LEIGH ACRES FL CITY - ST - ZIP 1.4 CITY - ST- 2IP DELETE 2.1 TITLE ☐ Change ■ Addition TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change 4.1 TITLE ☐ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition ☐ Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHTY - ST - ZIP DEL ETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST- ZIP

CITY-ST-ZIP 14. Thereby 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 changes; or on an attachment with an address.

941-224.9700