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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **V09665**

1. Corporation Name

Principal Place of Business

PLEASANT VIEW LAND, INC.

3000 GULF TO BAY BLVD. SIXTH FLOOR		3000 GULF TO BAY BLVD. SIXTH FLOOR CLEADMATER EL 22759					DO NOT WR	ITE IN THIS	SPACE	1	
CLEARWATER FL 33759 US		CLEARWATER FL 33759 US				3. Date Incorporated or Qualifed 01/28/1992					
2. Principal Place of Business		2a. Mailing Address				4 FEI Number				Ann	lied For
¬ '		H			1 -	59-3105284				<del>                                     </del>	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				33 0 100201			\$8.7	-	ditional
		27				<ol><li>Certificate of St</li></ol>	atus Desired		<b>+</b>	e Req	
City & State		City & State				6, Election Campa	aign Financing		\$5.	.00 k	May Be
23		28			- 1	Trust Fund Cor				ded to	
Zip Country		Zip				8. This corporation	n owes the cur	rent year Int	angible		
24	25	29	i -			Personal Prope			☐ Yes	[	]No
<u> </u>	9. Name and Address of Current	Registered Agent			10	0. Name and Add	iress of New	Registered .	Agent		
		•	81	Name		•					
	ER, MAURICE F.		82	82 Street Address (P.O. Box Number is Not Acceptable)							
	GULF TO BAY BLVD	•	- Charles (1 to an include to the particular to								
6 FL			83								
· CLE	ARWATER FL 33759		84	City			- #	-	85	Zìp C	Dde
								FL	.   🔟		
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	Signature, typed or printed name of registered agent of	and title if applicable (NOTE: Re	nistered Ane	nt signature r	required whe	n reinstating)		DATE			
12.	OFFICERS AND		13.	it signibility (	Toquilde Hills	ADDITIONS/CH.	ANGES TO O	FFICERS AN	ID DIRE	CTOF	RS IN 12
TITLE	PTD	☐ DELETE	1,1 TITLE		.VP				☐ Cha		Addition
NAME	WILDER, MAURICE F.		1.2 NAME		Gred	gory J. Mo	rgan				. %
STREET ADDRESS	3000 GULF TO BAY BLVD, 6 FL		13STREE	T ADDRESS		Gulf to		d.			
	CLEARWATER FL		1.4 CITY-S			arwater, F	_				
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	3000 GULF TO BAY BLVD. 6TH	FI		T ADORESS							}
STREET ADDRESS	CLEARWATER FL	• •	2.4 CITY-								. }
CITY-ST-ZIP TITLE	VPD	☐ DELETE	3.1 TITLE	31-21	1				☐ Cha	ange	Addition
NAME	WILDER, COLBY M										
STREET ADDRESS	3000 GULF TO BAY BLVD, 6 FL		•	T ADDRESS	1						ĺ
	CLEARWATER FL		3.4. CITY-								
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STREET ADDRESS			•	T ADDRESS				-			
•	<u> </u>	<del>,</del>	4.4 CITY-5								
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE		<b>†</b>				Cha	enge	☐ Addition
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREE	TADDRESS							l I
			5.4 CITY-5	T-ZIP							
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	. <u>.</u>	1				[] Cha	ange	Addition
NAME		_	6.2 NAME								
STREET ADDRESS			6.3 STREE	T ADDRESS	:1						ĺ
CITY-ST-ZIP			6.4 CITY-S								
44 I horoby	certify that the information supplied with	this filing does not qualify for th	e exemn	ion states	d in Secti	ion 119.07(3)(i), Fi	orida Statutes	, I further cer	tify that	the in	formation
indicated officer or	on this annual report or supplemental a director of the corporation or the receiv or Block 13 if changed or on an attach	annual report is true and accurativement trustee empowered to exe	te and tha cute this i	it my sign report as	nature sna required	ali nave the same.	legal effect as	ir mage uno	er oam.	ulati	aman

SIGNATURE:

FILED Apr 23, 1999 8:00 am Secretary of State

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