

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



DOCUMENT # V58096 (1)
1. Corporation Name L.A.C.C., INC.

Principal Place of Business 1525 S. ANDREWS AVE SUITE 213 FT. LAUDERDALE FL 33316 US	Mailing Address 1525 S ANDREWS AVE #213 FORT LAUDERDALE FL 33316 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27		
City & State 23	City & State 28		
Zip 24	Country 25	Zip 29	Country 30

3. Date Incorporated or Qualified 08/13/1992	3a. Date of Last Report 02/02/1996
4. FEI Number 65-0352736	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ELIAS, STEVEN D. 1184 E OAKLAND PARK BLVD SUITE 200 FT LAUDERDALE FL 33334	
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10. Name and Address of New Registered Agent	
81 Name Marie J. Love	
82 Street Address (P.O. Box Number is Not Acceptable) 1525 S. Andrews Avenue	
83 Suite Suite 213	
84 City Ft. Lauderdale	85 Zip Code FL 33316

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 *Marie J. Love* **Marie J. Love - Secretary** **7/18/97**
Signature: Typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when changing agent.) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LOVE, CHARLES A. 2518 CAT CAY LN FT LAUDERDALE FL <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LOVE, MARIE J. 2518 CAT CAY LN FT LAUDERDALE FL <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 *Marie J. Love* **Marie J. Love** **7/18/97**

CR2E034 (4/97)

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LACC inc.

LANDSCAPE ARCHITECTURAL CONSTRUCTION CONSULTANTS

July 18, 1997

Divisions of Corporations
Annual Reports
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Please be advised that we have just received our 1997 corporation annual report packet and were surprised to see an indication of a second notice. The mail delivery in this area has been extremely poor and we are sure we did not receive the original packet. After communicating with your office it was suggested we write this note, complete the report and include our check for \$165.00.

Sincerely,

