

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1998.**  
**AMOUNT DUE ON OR BEFORE 6/30/98: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO NEWSTATE: \$375)**

**PROFIT CORPORATION ANNUAL REPORT 1995**



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

**FILED**  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 95 JUL 21 11:10:25

**DOCUMENT # V70287 (0)**

1. Corporation Name  
**LANDRUM ENTERPRISES, INC.**

Principal Place of Business: 5026 GALL BLVD. ZEPHYRHILLS FL 33541 US  
 Mailing Address: 5026 GALL ROAD ZEPHYRHILLS FL 33541 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>10/06/1992</b>		3a. Date of Last Report <b>02/24/1994</b>	
4. FEI Number <b>59-3146738</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 198.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26 <b>Rt 1 Box 113</b>		59-3146738		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 198.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28 <b>Avery TX</b>		9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Zip		Zip		LANDRUM, LEE A. 5026 GALL BLVD. ZEPHYRHILLS FL 33541		81 Name	
24		29 <b>75554</b>		Country		82 Street Address (P.O. Box Number is Not Acceptable)	
25		30 <b>U.S.</b>		83		84 City	
				85 Zp Code		<b>FL</b>	

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANDRUM, LEE A.	2. NAME	
STREET ADDRESS	3804 MORRIS BRIDGE ROAD	3. STREET ADDRESS	<b>Rt 1 Box 113</b>
CITY - ST - ZIP	ZEPHYRHILLS FL	4. CITY - ST - ZIP	<b>Avery TX 75554</b>
TITLE	D	2. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANDRUM, JOYCE	2. NAME	
STREET ADDRESS	3804 MORRIS BRIDGE ROAD	2. STREET ADDRESS	<b>Rt 1 Box 113</b>
CITY - ST - ZIP	ZEPHYRHILLS FL	2. CITY - ST - ZIP	<b>Avery TX 75554</b>
TITLE		3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY - ST - ZIP		3. CITY - ST - ZIP	
TITLE		4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY - ST - ZIP		4. CITY - ST - ZIP	
TITLE		5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY - ST - ZIP		5. CITY - ST - ZIP	
TITLE		6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY - ST - ZIP		6. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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: Lee A. Landrum Lee A. Landrum 6-16-95 908-684-3847  
 (Name) (Type in 14 characters)

CR2E034 (3/95)