FILE NOW: FILING FEE AFTER MAY 1 IS \$55



PROFIT CORPORATION ANNUAL REPORT 1997		Sandra E Secreta	FLORIDA DEPARTMENT OF STATE Sandra B. Mori, am Secretary of State DIVISION OF CORPORATIONS		Feb 12 1997 8:00am Secretary of State	
	IMENT # 21989 RESOURCES, INC.	94 (3)				
Principal Place of Business 1470 HWY. 17 SOUTH BARTOW FL 33830 US		Mailing Address C/O A E HOLLAND. JR P.O. BOX 819 BARTOW FL 33831-0819 US	C/O A E HOLLAND. JR P.O. BOX 819 BARTOW FL 33831-0819		3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1959 01/29/1996	
2. Principal	Place of Business	2a. Mailing Address	····	4. FEI Number	Applied For	
21		26		59-6080945	Not Applicable	
Suite, Api		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	31e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Z _{(P}	Country 30	8. This corporation has fiability for		
	9. Name and Address of (Current Registered Agent	81 Name	10. Name and Address of New R	egistered Agent	
HOLLAND, A E, JR 1470 HWY 17, SOUTH BARTOW, FL				ress (P.O. Box Number is Not Accepta	ible)	
338	•		83			
			84 City		FL 85 Zip Code	
11. Pursuan office or agent. I SIGNATURE			es, the above-named cor authorized by the corpora orida Statutes. E. Registered Agent signature requ	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing its registered ept the appointment as registered	
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS	HOLLAND, A.E. JR 1470 HIGHWAY 17 S		1.2 NAME 1.3 STREET ADDRESS			
Crty-St-ZiP	BARTOW, FL 00000		1.4 CITY+ST-ZIP			
TITLE	SD	☐ DELÉTE	2.1 TITLE		Change Addition	
NAME DESCRIPTION	KING, AUGUSTUS 1470 HIGHWAY 17 S		22 NAME			
STREET ADDRESS CITY - ST - ZIP	BARTOW FL		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP	·		
TITLE	VTD	DELETE	31 TITLE	·····	☐ Change ☐ Addition	
NAME	MCLAULIN, DOUG, JR		3.2 NAME	•	e e constant de la co	
STREET ADDRESS	1470 HIGHWAY 17 S BARTOW, FL 00000		3.3 STREET ADDRESS			
DITY-ST-ZIP TITLE	AT	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition	
NAME	PETERSON, JAMES H	_	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	, at the state of	(
CITY-ST-ZIP	HAZELHURST GA	Dr. FIG	4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE 5.2 NAME		Change L Addition	
NAME STREET ADDRESS	;		5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME		•	6.2 NAME			
STREET ADDRESS	5	Λ	6.3 STREET ADDRESS			
14. I do her	eby certify that the informations	upglied with this filing does not qual	64 CiTY-ST-ZIP ify for the exemption state	d in Section 119.07(3)(i), Florida Statut	tes. I further certify that the	
informat Lam an	ion indicated on this annual repa officer or director of the curpura	ort or supplemental annual report is to the the receiver or trustee empoy	true and accurate and tha vered to execute this repo	d in Section 119.07(3)(i), Florida Statut at my signature shall have the same leg ort as required by Chapter 607, Florida	jat effect as if made under oath; that Statutes; and that my name	

ECUTREDA.E. HOWAND, SA-PASS 1/17/97

FILED

CR2E034 (9/96)