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Apr 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 246321 (4)  
1. Corporation Name  
THRIFTWAY PROPERTIES OF SEBRING INC



Principal Place of Business  
3601 CYPRESS GARDENS RD.  
F  
WINTER HAVEN FL 33884  
US

Mailing Address  
1308 LAKE MIRROR TERR NW  
WINTER HAVEN FL 33881-2338  
US

3. Date Incorporated or Qualified 04/04/1961  
3a. Date of Last Report 04/26/1996  
4. FEI Number 59-0967663  
Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
25

2a. Mailing Address  
26 1308 MIRROR TERR NW  
27 Suite, Apt. #, etc.  
28 City & State  
29 Zip  
30 Country

9. Name and Address of Current Registered Agent  
KONDOR, JAMES O.  
1308 LAKE MIRROR TERR. NW  
WINTER HAVEN FL 33881

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
1308 MIRROR TERRACE NW  
83  
84 City FL 85 Zip Code

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 and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE PD  DELETE  
NAME KONDOR, PHYLLIS E  
STREET ADDRESS 1308 LAKE MIRROR TERRACE  
CITY-ST-ZIP WINTER HAVEN FL  
TITLE STD  DELETE  
NAME JAMES O. KONDOR  
STREET ADDRESS 1308 LAKE MIRROR TERRACE  
CITY-ST-ZIP WINTER HAVEN FL  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS 1308 MIRROR TERRACE NW  
1.4 CITY-ST-ZIP WINTER HAVEN, FL 33881  
2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS 1308 MIRROR TERRACE NW  
2.4 CITY-ST-ZIP WINTER HAVEN, FL 33881  
3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 changed, or on an alternate with an address.

SIGNATURE: James O. Kondor 1-14-97 941-384-7711  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)