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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 296958

TITLE

NAME

STREET ADDRESS

121

1. Corporation	DY INCORPORATED	(2)					Alan Alan A	
Principal Plac	ce of Business	Mailing Address				-{		
1925 MAPLEWOOD DR.		1925 MAPLEWOOD DR.						
ORLANDO FL 32903		ORLANDO FL 32803						
						DO NOT WRITE IN THIS S	PACE	
						3. Date Incorporated or Qualified 09/21/1965		
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-1111423	-	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired		Required
City & Stat	le	City & State				8. Election Campaign Financing	\$5.0	O May Be
23		28	,			Trust Fund Contribution		d to Fees
Zip			<u> </u>	untry	1	8. This corporation owes or has paid the curr		
24	[25]	29	30				Yes	□ No
	g, Name and Address of Curre	nt Hegistered Agent	· · · · · · · · · · · · · · · · · · ·	B1	Name	10. Name and Address of New Registered	(gent	
	RRY, W.L.							
1925 MAPLEWOOD DR. ORLANDO FL 32803				B2	Street Addre	ess (P.O. Box Number is Not Acceptable)		
ONDANDO PE 32003								
							11 =	
				84	City	FL	85 Zi	p Code
agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statut of Florida. Such change was a lations of, Section 607.05 05 , Flo	es, the a authorize orida Sta	bove d by tutes	e-named corporations.	oration submits this statement for the purpose of on's board of directors. I hereby accept the appr	changing pintment a	its registered as registered
SIGNATURE	Signature, typed or printed name of registered ag-	erit and title if applicable (NO1	E: Registere	d Age	nt signature required	d when reinstating) DATE		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12
TITLE	PD DELETE		1.5 TI	1.5 TITLE			Change	e 🔲 Addition
NAME	CURRY, WILLIAM L		1.2 N	1.2 NAME				
STREET ADDRESS	1925 MAPLEWOOD DR		1.3 S		ADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 City-St-ZiP		T-ZIP			
TITLE	STD DELETE		2.1 Ti	2.1 TITLE			☐ Change	Addition
NAME	CURRY, HARRIET H.		2.2 N	AME				
STREET ADDRESS	1925 MAPLEWOOD DR		2.3 S	TREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL				I-ZIP			
TITLE	— <u> </u>		3.1 TI	TLE			Change	Addition
NAME	PRIBIL, DAIL C		3.2 N	AME				
STREET ADDRESS	1653 ROUNDELAY LANE		3.3 S	TREET.	ADDRESS			
CITY-ST-ZIP	WINTER PARK FL		3.4. CITY -		T-ZIP			
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		Dougat		ITY-SI	r-ZiP		Dhar	12199
TITLE		DELETE	5.1 TI				L Change	Addition
NAME			5.2 N					
STREET ADDRESS				5.3 STREET ADDRESS				
CITY-ST-7IP			■ 5.4 Ci	17 ST	I-ZIP I			I

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

Change

___ Addition

FILED

Mar 03 1998 8:00am

Secretary of State