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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(3)

FILED Jan 20 1998 8:00am Secretary of State

	, GIRVIN, BLAKESLEE & CAI ACCOUNTANTS, P.A.	MPBELL, CERTIFIED F)		
Principal Plac	ce of Business	Mailing Address		T 100/11 GIALA BALLA LABEL ALBUT LATE BIRTI AII	ili mimii mimii mimii kimii lemt
		800 S. DILLARD STREET			
P.O. BOX 1047 WINTER GARDEN FL 34787-3910		P.O. BOX 1047		DO ALOT MIDITO IN TAIL	N 00 4 0 F
WINTER GAR	DEM FL 34787-3910	WINTER GARDEN FL 34787-3910		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				01/14/1975	
2 Principal F	Place of Business	2a, Mailing Address		4. FEI Number	Applied for
21		26		59-1567188	Applied For Not Applicable
Sulte, Apt.	#. elc.	Suite, Apt #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	d Agent
, Sines, Henry W.			81 Name		
800 S. DILLARD ST.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
,WI	NTER GARDEN FL 32787				
ł			83		
1			84 City		85 Zip Code
				FI	<u> </u>
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut of Llorida, Such change was	es, the above-named corp authorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered
agent. La	am familiar with, and accept the obliga	tions of, Section 607.0505, Fl	orida Statutes.	months board of directors. Thereby decouple the de	gominoni da regiatorea
SIGNATURE					
<u> </u>	Signature, typed or printed name of registered ager		E: Registered Agort signature requi		ID DIDEOTODO III 40
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	SINES, HENRY W.	LJ OECEIL			Change Addition
	215 N VALENCIA SHORE DR		1.2 NAME		
STREET ADDRESS	WINTER GARDEN, FL 0		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	SD SD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	GIRVIN, J STEVEN	() percie	2.2 NAME		
1	1022 EDGEWATER COURT				
STREET ADDRESS	ORLANDO FL		2.3 STREET ADDRESS		ļ
TITLE	TD	DELETE	2 4 CITY - 61 - ZIP 3.1 TITLE		Change Addition
NAME	BLAKESLEE, DEREK J.	L) been	3.2 NAME		
STREET ADDRESS	230 N HIGHLAND AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER GARDEN FL		3.4. C(1) - S1 - ZIP		
TITLE	VPD	DELETE	4.1 TILLE		☐ Change ☐ Addition
NAME	CAMPBELL, JULIANNE	had because	4. 2 NAME		
STREET ADDRESS	1240 VINELAND ROAD		4.3 STREET ADDRESS		1
CITY-ST-ZIP	WINTER GARDEN FL 34787		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 1/TLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP	}		5.4 CHY-S1-ZIP		ļ
TITLE		DELETE	6.1 THEF		ChangeAddition
NAME		· -	6.2 NAME	9000024052	69 / //al
STREET ADDRESS			6.3 STREET ADDRESS	9000024052 -01/20/38010390 ***150.00	11 4 (14)
CITY-ST-ZIP			6.4 CITY - ST - ZIP	***150.00	V V
J.1.1 U1 41					

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.

HELOW IN SINE

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407-658-1611