2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 26, 2004 8:00 am Secretary of State

NAME YSTREET ADDRESS CITY-ST-ZIP SEBRING, FL 33870 TITLE SAGER, WILLIAM C STREET ADDRESS CITY-ST-ZIP TITLE SAGER, WILLIAM C STREET ADDRESS CITY-ST-ZIP TITLE AVON PARK, FL 33825 TITLE NAME VELLS, STANLEY STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME MUNDT, LEW Change Additional Companies of the Companies of the Companies of the Change Additional Companies of the Change Additional Change	1. Entity Nam	ne	# 740111)F AVON PARK, I	NC.	,			01-26-2004 90014 043 ****61.25				
Suite. Apt. F. etc. Suite. Apt. F. etc. Suite. Apt. F. etc. Suite. Apt. F. etc. O1052004 Chg-NP CR2E037 (10/03) Applied For Non Applied Spire Spire State	20 S VERONA AVE P.O. BOX 81											
City & State City & State Country 2p Country 3p3256 Country 5. Certification of Status Desired 6. Name and Address of New Registered Agent 7. Name and Address of New	Principal Place of Business 3. Mailing Address											
Country 33926 Country 33926 Country 5. Certificate or Status Desired \$8.75. Additional Fee Required \$8.75. Additiona	Suite, Apt.	#, etc.		Su	Suite, Apt. #, etc.			01052004 (Chg-NP	CR2E03	7 (10/03)	٠.
Country 339326 Country 5. Certificate of Status Desired \$8.75-Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HILTON, FORREST H. 702 US 27 NORTH AVON PARK, FL 33825 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and access the obligations of egistered agent. SIGNATURE Filling Fee is \$61.25. Due by May 1, 2004 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE NAME SIBET ADDRESS OTY-ST-2P SEBRING, FL 33870 Delde SIGNATURE SIGNATURE 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE NAME SIBET ADDRESS OTY-ST-2P SEBRING, FL 33825 TITLE SAGE, WILLIAM C SAGE, STANLEY HOUSE STORE TOORS. OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825 TITLE D DELGE NAME SIBET ADDRESS OTY-ST-2P AVON PARK, FL 33825	City & Stat	te	·····	Ci	City & State			4. FEI Number 59-62096	- <u> </u>		·	
HILTON, FORREST H. 702 US 27 NORTH AVON PARK, FL 33825 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accelled the obligations of registered agent. SIGNATURE SIGNATURE FITTING For its \$61.25. Due by May 1, 2004 PITTING For its \$61.25. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT IT. INAME AND SEBRING, FL 33825 TITLE NAME STRET ADDRESS OTIV-ST-2P STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUB LEMEL, WILLIAM C STRET ADDRESS 1545 W. PO.NISETTIA DR. AVON PARK, FL 33825 TITLE D DUB LEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUB LEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUBLEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUBLEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUBLEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUBLEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DUBLEMEL, WILLFORD J STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DELETE DELETE MAME STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DELETE MAME STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DELETE MAME STRET ADDRESS OTIV-ST-2P AVON PARK, FL 33825 TITLE D DELETE MAME D	Zip		Country	33	826	Country	- -	5. Certificate of S	Status Desired		\$8.75 Add	litional
HILTON, FORREST H. 702 US 27 NORTH AVON PARK, FL 33825 City FL Zip Code	6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable to the obligations of registered agent agent agent agent agent required agent	_					Name						
Elity FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accertified obligations of registered agent. SIGNATURE Signature, hybrid or ormal name of registered agent and title 4 applicative. (IXTE: Registered Agent soptimizer required when refusering) Part Filling, Foe. is \$61.25. Due by May 1, 2004 Trust Fund Countribution. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE NAME DISLER, MICHAEL 329 S COMMERCE AVE SEBRING, FL 33870 Delete TITLE S SAGER, WILLIAM C STRET ADDRESS STRET ADDRESS STRET ADDRESS CITY-ST-2P TITLE DAY AVON PARK, FL 33825 CITY-ST-2P AVON PARK, FL 33825	702 US 27	NORTH		Street A	Street Address (P.O. Box Number is Not Acceptable)							
8. The above named entity aubmits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accelling the obligations of registered agent. SIGNATURE Signature. Typed or privind name of registered agent agent and text 4 apphasus. (ICTE: Registered Agent software toward when remaitance) Pulp by May 1, 2004 Trust Fund Contribution. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS in 10 DISLER, MICHAEL STRET ADDRESS OTY-ST-ZP TITLE SAGER, WILLIAM C STRET ADDRESS SAGER, WILLIAM C STRET ADDRESS CITY-ST-ZP AVON PARK, FL 33825 CITY-ST-ZP AVON PARK, FL 3382	AVOIT AIN, 12 33023						Sit.					
the obligations of registered agent. SIGNATURE: Signature, hyped or privide name of registered agent and title 4 applicative. Filling: Fee: is \$61.25. Due by May 1, 2004 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TOURS 329 S COMMERCE AVE STREET ADDRESS OTTY-ST-ZP SAGER, WILLIAM C STREET ADDRESS OTTY-ST-ZP TITLE D WELLS, STÄNLEY STREET ADDRESS OTTY-ST-ZP TITLE D Detele TITLE D Detele TITLE D Detele TITLE SAGER, WILLIAM C STREET ADDRESS OTTY-ST-ZP TITLE D DETECTORS STREET ADDRESS OTTY-ST-ZP TITLE D WELLS, STÄNLEY STREET ADDRESS OTTY-ST-ZP TITLE D DETECTORS STREET ADDRESS OTTY-ST-ZP AVON PARK, FL 33825 TITLE D DETECTORS STREET ADDRESS OTTY-ST-ZP AVON PARK, FL 33825 TITLE D DETECTORS STREET ADDRESS OTTY-ST-ZP AVON PARK, FL 33825 TITLE D MAKE STREET ADDRESS OTTY-ST-ZP AVON PARK, FL 33825 TITLE D Change Additional Add	8. The above	named entit	ty submits this statemen	t for the purp	oose of changing its		register	ed agent, or both, i	n the State of Fi		<u> </u>	
Signature repositor dependent agent and late if appicable. (HOTE: Registered Agent signature required) DATE	the obligat	tions of regis	itered agent.									,
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE NAME VSTRET ADDRESS CITY-ST-ZIP SEBRING, FL 33870 TITLE NAME SAGER, WILLIAM C STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D WELLS, STÄNLEY STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D BUEMEL, WILFORD J STREET ADDRESS CITY-ST-ZIP TITLE NAME BUEMEL, WILFORD J STREET ADDRESS CITY-ST-ZIP TITLE NAME BUEMEL, WILFORD J STREET ADDRESS CITY-ST-ZIP TITLE NAME BUEMEL, WILFORD J STREET ADDRESS CITY-ST-ZIP TITLE D BUEMEL, WILFORD J STREET ADDRESS CITY-ST-ZIP TITLE D Change Additi NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME MUNDT, LEW Change Additi NAME TITLE NAME NAME TITLE NAME NAME TITLE NAME NAME TITLE NAME NAME NAME TITLE NAME NAME NAME NAME NAME NAME NAME NAM	SIGNATURE		d or printed name of registered ag	ent and tale if ap	phoable. (NOT	E: Registered Agent signat	ure required	i when resistating)		DATE		
TITLE NAME VSHEET ADDRESS CITY-ST-ZIP SEBRING, FL 33870 TITLE NAME SAGER, WILLIAM C STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D WELLS, STÄNLEY STREET ADDRESS CITY-ST-ZIP TITLE D WELLS, STÄNLEY STREET ADDRESS CITY-ST-ZIP TITLE SUCH STREET ADDRESS CITY-ST-ZIP TITLE D WELLS, STÄNLEY STREET ADDRESS CITY-ST-ZIP TITLE D WELLS, STÄNLEY ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP TITLE D WELLS, STÄNLEY TITLE D Change Additional Additional Change Additional	. , , , , , , ,				9. Election Car Trust Fund (mpaign Financing Contribution.	· 🗖 ` · ·	\$5.00 May Be				
TITLE NAME NAME NAME NAME NAME NAME NAME SEBRING, FL 33870 Delete TITLE NAME SAGER, WILLIAM C STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME STREET ADDRESS CITY-ST-ZIP NAME NAME BUEMEL, WILFORD J STREET ADDRESS CITY-ST-ZIP NAME NAME NAME NAME NAME NAME NAME NAME	10.		OFFICERS AND	DIRECTORS	<u></u>	11.		ADDITIONS/CHAN	GES TO DEFICE	RS AND DI	RECTORS IN	10
NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE NAME NAME NAME NAME NAME NAME NAME NAM	TITLE NAME *STREET ADDRESS	DISLER, 329 S CO	MICHAEL DMMERCE AVE	BINEOTOTIC		TITLE NAME STREET ADDRESS			a <u>es 10 011 lee</u>	ING AND DI		Addition
NAME WELLS, STÄNLEY STRET ADDRESS 1600 US 27 S CITY-ST-ZIP AVON PARK, FL 33825 TITLE D Delete TITLE NAME BUEMEL, WILFORD J STRET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP AVON PARK, FL 33825 TITLE P Delete TITLE NAME STRET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 TITLE P Delete TITLE NAME MUNDT, LEW Change Additional Control of the Munder of the Mund	NAME STREET ADDRESS	S SAGER, V 1545 W. F	WILLIAM C POINSETTIA DR.		Delete	name Street address	5 D				Change	Addition .
NAME STREET ADDRESS 905 LAVE ANGELO DR STREET ADDRESS CITY-ST-ZIP AVON PARK, FL 33825 CITY-ST-ZIP TITLE P Delete TITLE NAME MUNDT, LEW NAME NAME	NAME STREET ADDRESS	WELLS, 9	27 S		☐ Delete	NAME STREET ADDRESS	PL)	-		Change	Addition
NAME MUNDT, LEW	NAME STREET ADDRESS	BUEMEL 905 LAVE	E ANGELO DR		☐ Delete	NAME Street address					Change	Addition
CITY-ST-ZIP AVON PARK, FL 33825	NAME STREET ADDRESS	MUNDT, 431 E SH AVON PA	IOCKLEY RD ARK, FL 33825		☐ Delete	name Street address	D				Change	☐ Addition
TITLE D Delete TITLE Change Additional Control of the Control of t	NAME STREET ADDRESS CITY-ST-ZIP	SHIRLEY 94 E. RA	/, C.B YMOND ST		☐ Delete	NAME Street address		Maria de la compansión de			☐ Change	☐ Addition

STANLEY H. WELLS - PRES.