

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90020 019 ***550.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **G60134**

Corporation Name
FLORILOW, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
 1272 SO. U.S. 301
 BOX 101
 BUSHNELL FL 33513
 JS

Mailing Address
 4272 SO. U.S. 301
 BOX 101
 BUSHNELL FL 33513
 US

3. Date Incorporated or Qualified
09/20/1983

4. FEI Number
59-2331458

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 owes the current year Intangible Personal Property. Yes No

Principal Place of Business
 26

2a. Mailing Address
 Suite, Apt. #, etc.
 27

City & State
 28

Zip Country
 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NASSIF, MERPH
 4272 SO US 301 STE 124
 4272 SO. U.S. 301
 BUSHNELL FL 33513

81 Name **Richard L. Allam**

82 Street Address (P.O. Box Number is Not Acceptable)
4272 South US Highway 301

83

84 City **Bushnell** FL 85 Zip Code **33513**

1. 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 **RICHARD L. ALLAM** *Richard L. Allam* **6-30-99**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE) Registered Agent signature required when reinstating. DATE

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

LE	P	<input type="checkbox"/> DELETE
ME	NASSIF, MERPH	
REET ADDRESS	4272 S US 301 STE 124	
Y-ST-ZIP	BUSHNELL FL 33513	
LE	VP	<input type="checkbox"/> DELETE
ME	BEACOM, MARY	
REET ADDRESS	4272 S US 301 STE 218	
Y-ST-ZIP	BUSHNELL FL 33513	
LE	T	<input type="checkbox"/> DELETE
ME	CRANSTON, JEANETTE	
REET ADDRESS	4272 S US 301 STE 117	
Y-ST-ZIP	BUSHNELL FL 33513	
LE	S	<input checked="" type="checkbox"/> DELETE
ME	BATCHELDER, ANNE	
REET ADDRESS	4272 S US 301 STE 240	
Y-ST-ZIP	BUSHNELL FL 33513	
LE		<input type="checkbox"/> DELETE
ME		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
ME		
REET ADDRESS		
Y-ST-ZIP		

1.1 TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	JEAN MILLER	
5.3 STREET ADDRESS	4272 SOUTH US HIGHWAY 301	
5.4 CITY-ST-ZIP	BUSHWELL, FL 33513	
6.1 TITLE	AGENT/PARK MANAGER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	RICHARD L. ALLAM	
6.3 STREET ADDRESS	4272 S US HWY 301	
6.4 CITY-ST-ZIP	BUSHWELL, FL 33513	

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.

SIGNATURE: *Richard L. Allam* **6-30-99** **352-793-6487**
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (5/99)