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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L93936

(7)

SETTLER'S MOUNTAIN, INC.

| 800 SOUTH POWERLINE RD. DEERFIELD BEACH FL 33442 | 600 SOUTH POWERLINE RD. DEERFIELD BEACH FL 33442-8111 | |
|---|--|--|
| Principal Place of Business | Mailing Address | |

FILED Mar 17 1997 8:00am Secretary of State



| 800 SOUTH POWERLINE RD. DEERFIELD SEACH FL 33442 | | 600 SOUTH POWERLINE RD. DEERFIELD BEACH FL 33442-8111 | | | | | | | | |
|---|--|--|-----------------|------------------------------------|----------------------------------|--|-----------------------------|-----------------|--------------|--|
| | | | | | | 3. Date Incorporated or Qualified 08/15/1990 | 3a. Date 03/07 | of Last R | eport | |
| | ace of Business | 2a, Mailing Address | | | | 4. FEI Number | | Ap | plied For | |
| 21 | | 26 | | | | 65-0235935 Not Applicat | | | | |
| Suite, Apt. : | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | | | |
| City & State | | City & State | | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | | |
| Zip 24 | Country 25 | Zip Cour 29 30 | | | | 8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes | | | | |
| | g. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New Reg | pistered Ag | ent | | |
| KRA | FT, KEVIN A. | | - | 81 | Name | | | | | |
| 600 SOUTH POWERLINE RD. DEERFIELD BEACH FL 33442 | | | | 82 | Street Addr | ot Address (P.O. Box Number is Not Acceptable) | | | | |
| 066 | NFIELD DEAOIT FL 33442 | | Ţ | 83 | | | | | | |
| | | | } | 84 | City | | FL | 85 Zip (| Code | |
| 11. Pursuant t | o the provisions of Sections 607 0502 | and 607 1508 Florida Statut | tes the ab | | -named corr | poration submits this statement for the p | urpose of ch | i anging it | s registered | |
| I office or re | egistered agent, or both, in the State of familiar with, and accept the obligation | if Florida. Such chance was a | authorized | l by | the corporat | tion's board of directors. I hereby accep | t the appoir | tment as | registered | |
| SIGNATURE . | | | | | | | | | | |
| | Signature, typed or printed name of registered agen OFFICERS AND | | | Agen | nt signature requir | red when reinstating) ADDITIONS/CHANGES TO OFFIC | DATE | PECTOR | CINIAO | |
| 12. | D OF TOURS AND | DELFTE | 13. 1.1 Itil | ı F | T | ADDITIONS/CHANGES TO OFFIC | | Change | Addition | |
| NAME | KRAFT, ALBERT H., JR | 1.2 N | | | | | - | | | |
| STREET ADDRESS | The second secon | | 1.3 STR | 3 STREET ADDRESS | | | | | | |
| CITY-ST-2IP | DEERFIELD BEACH FL | | | Y-51 | - ZIP | | | | | |
| TITLE | D | DELETE 2 | | 2 1 THILE | | | [| Change | Addition | |
| NAME | KRAFT, MILDRED E. | | 2 2 NAI | 2 2 NAME | | | | | | |
| STREET ADDRESS | 600 SOUTH POWERLINE RD. | | 2.3 STH | 2.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | <u> </u> | | | | 1 - 210 | | | 1 Channa | Addition | |
| TITLE | _ | | 31711 | | | | |] Change | L_J Addition | |
| NAME | KRAFT, KEVIN A. | | | 3.2 NAME | | | | | | |
| STREET ADDRESS | AMPANIA A BELOW M | | | 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | | | | | | |
| CITY-\$1-ZIP | | | 4,1 1111 | | 01.50 | | | Change | Addition | |
| NAME | | - | 4. 2 NA | | | | | - | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| CITY-\$T-ZIP | | | 4.4 CH | | | | | | | |
| TITLE | | | 5.1 7111 | 5.1 TITLE | | | | Change | Addition | |
| NAME | | | 5.2 NAI | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 5.3 S1F | 5.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 5.4 C/T | | - 71P | · | | <u></u> | | |
| TITLE | | ∟ DELETE | 6.1 1111 | LŁ | | | L | Change | L Addition | |
| NAME | | | 6.2 NA | ME | | | | | | |
| STREET ADDRESS | | | 6.3 STH | REEL A | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6401 | Y-SI | | d in Section 119 07(3Vi) Elected Statutes | Lifudhara | setifu dhat | tho | |

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 Statutos. I further certify that the Information indicated on this annual report or supplicemental 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.

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TOOL ALLIK. LIN

×3-11-97 (954)421-4300