## 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

1**9**98

# M64600

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| FILED              |  |  |  |  |  |  |  |  |  |
|--------------------|--|--|--|--|--|--|--|--|--|
| Sep 03 1998 8:00am |  |  |  |  |  |  |  |  |  |
| Secretary of State |  |  |  |  |  |  |  |  |  |

| ROYAL ENTERPRISES OF BARTOW, INC.  |   |                                    |                    |          |                                |  |                                       |                |                |  |
|--|---|------------------------------------|--------------------|----------|--------------------------------|--|---------------------------------------|----------------|----------------|--|
| Principal Place of Business Mailing Address  |   |                                    |                    |          |                                |  |                                       | J SIBI BIO     |                |  |
| % RONALD L. CLARK 4740 CLEVELAND HEIGHTS BLVD. LAKELAND FL 33813-2187  **RONALD L. CLARK 4740 CLEVELAND HEIGHTS BLVD. LAKELAND FL 33813-2187   |   |                                    |                    |          |                                | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified                                |                                       |                |                |  |
|  |   |                                    |                    |          |                                | 01/13/1988   |                                       |                |                |  |
| 2. Principal P   | lace of Business  | 2a. Mailing Address                |                    |          | ····                           | 4, FEI Number  |                                       | Ar             | oplied For     |  |
| 21   |   | 26                                 |                    |          |                                | 59-2865784   |                                       | Not Applicable |                |  |
| Suite, Apt. #, etc. Suite, Apt.  |   |                                    |                    |          |                                | 5. Certificate of Status Desired   | 7                                     |                | Additional     |  |
| 22   |   | 27                                 |                    |          |                                | S. Contribute of States Desired  |                                       | Fee Re         | equired        |  |
| City & Stat  | е   | City & State                       |                    |          | 6. Election Campaign Financing | ,  |                                       | May Be         |                |  |
| 23   | Country   | 7(0)                               | 8 Zip Country      |          |                                | Trust Fund Contribution  |                                       |                | to Fees        |  |
| 24   | Z <sub>1</sub> p Country Z <sub>1</sub> p 25 3                      |                                    |                    | шу       |                                | <ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol> |                                       |                | tangible<br>No |  |
| [24]   | g. Name and Address of Current                                      |                                    | 100                |          |                                | 16. Name and Address of New Regist   |                                       |                |                |  |
| CL   | <del></del>   |                                    |                    | 81       | Name                           |  |                                       |                |                |  |
| CLARK, RONALD L.<br>4740 CLEVELAND HEIGHTS BLVD.   |   |                                    |                    |          | Charles Andrea                 | (D.O. David, and a Mark Assessable)  |                                       |                |                |  |
| LAKELAND FL 33807  |   |                                    |                    | 82       | Street Addre                   | ss (P.O. Box Number is Not Acceptable)   |                                       |                |                |  |
|  | CECAND I E 00007  |                                    | ľ                  | 83       | <del> </del>                   |  |                                       |                |                |  |
|  |   |                                    |                    |          | 0.4                            |  | · · · · · · · · · · · · · · · · · · · | ne   7:-       |                |  |
|  |   |                                    |                    | 84       | City                           |  | FL                                    | B5 Zipi        | Code           |  |
| 11, 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  |   |                                    |                    |          |                                |  |                                       |                |                |  |
| 40   | Signature, typed or printed name of registered agen<br>OFFICERS AND |                                    | Registered         | Ager     | nt signature required          | ADDITIONS/CHANGES TO OFFICERS  | DATE                                  | IDECTOL        | 20 IN 12       |  |
| 12.  | D OF FOLING AND   | DELETE                             | 1.1 TITLE          |          |                                | ADDITIONS/CHANGES TO OFFICER   |                                       | Change         | Addition       |  |
| NAME   | OLINGER, GILBERT T., JR.  |                                    |                    | 1.2 NAME |                                |  |                                       |                |                |  |
| STREET ADDRESS   | 864 HELEN CIRCLE  |                                    | 1.3 STREET ADDRESS |          |                                |  |                                       |                |                |  |
| CITY-ST-ZIP  | BARTOW FL   | 1.4 C                              |                    | Y-SI     | T-71P                          |  |                                       |                |                |  |
| TITLE  |   | DELETE                             | 2.1 TITLE          |          |                                |  |                                       | Change         | Addition       |  |
| NAME   |   |                                    | 2.2 NAME           |          |                                |  |                                       |                | Į.             |  |
| STREET ADDRESS   |   |                                    | 2.3 STREET ADDRESS |          | ADDRESS                        |  |                                       |                | İ              |  |
| CITY-ST-ZIP  |   |                                    | 2. 4 CITY+ST-7IP   |          |                                |  |                                       |                |                |  |
| TITLE  |   | DELETE                             | 3.1 TIT            | LF       |                                |  | , L                                   | Change         | Addition       |  |
| NAME   |   |                                    | 3.2 NA             | ME       |                                |  |                                       |                | į              |  |
| STREET ADDRESS   |   |                                    | 3 3 S I I          | REET A   | ADDRES\$                       |  |                                       |                | ļ              |  |
| CITY-ST-ZIP  |   |                                    | 3.4. CF            | IY-S     | T-ZIP                          |  |                                       |                |                |  |
| TITLE  |   | ☐ DELETE                           | 4.1 TIT            | l E      |                                |  | L                                     | Change         | Addition       |  |
| NAME   |   |                                    | 4. 2 NA            | ME       |                                |  |                                       |                |                |  |
| STREET ADDRESS   |   |                                    | 4.3 STI            | REFT     | ADDRESS                        |  |                                       |                |                |  |
| CITY-ST-ZIP  |   | The server                         | 4.4 C(1            |          | I-ZIP                          |  |                                       | 0              | TTEREST        |  |
| TITLE  |   | ☐ DELETE                           | 5.3 117            |          |                                |  | · <b>L</b>                            | Change         | Addition       |  |
| NAME   |   |                                    | 5.2 NA             |          |                                |  |                                       |                |                |  |
| STREET ADDRESS   |   |                                    |                    |          | ADDRESS                        |  |                                       |                |                |  |
| CITY-ST-ZIP  |   | DELETE                             | 5.4 CIT            |          | - ZIP                          |  |                                       | Change         | Addition       |  |
| TITLE  |   | ☐ berete                           | 6.1 TIT            |          |                                |  | <b>L</b>                              | บาดเปรีย       | L WOULDON      |  |
| NAME   |   |                                    | 6.2 NA             |          | *DDDCCC                        |  |                                       |                | ļ              |  |
| STREET ADDRESS   |   |                                    | 1                  |          | ADDRESS                        |  |                                       |                | j              |  |
| 14. I hereby o   | certify that the information supplied wit                           | n this filing does not qualify for | 6.4 CiT            |          |                                | ection 119.07(3)(i), Florida Statutes. I furth   | her <b>cer</b> lif                    | that the       | information    |  |

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 of applicance 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 corporationally the receiver or tables empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes of the corporational with an address.

X8-16-90 X941-53-12