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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 18 1997 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400005091 (1)

SKATE STATION MANDERIN, INC.

								1 18311681 113 (81) 8 667 (80) 8	AN 1811 <b>181</b>			
Principal Place of Business Mailing Address								- ( )				
751 N.E. 94TH PL. GAINESVILLE FL 32809 US			751-N.E. 34TH.PL GAINESYILLE FL 32809-2346									
		7						3. Date Incorporated or Qualified 01/20/1994	fied 3a. Date of Last Report 09/26/1996			
2. Principal Place of Business			28. Mailing Address					4. FEI Number			pplied For	
21			26 POBOX 140068					59-3234763		No	ot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired	
City & State			City & State  Cainesville F14.				<b>4</b> .	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees				
Zip	Country	T_	Zip Countr					8. This corporation has liability for intangible tax under s. 199.032,				
24	25	·		] us			Florida Statutes					
9, Name and Address of Current Registered Agent						-r		10. Name and Address of New Registered Agent				
BURKETT, ORIS L						1	Vame					
751 N.E. 34TH PL.						2 8	Street Addre	ess (P.O. Box Number is Not Accepta				
GAINESVILLE FL 32609					83	3						
					84	1 6	Dity			<b>85</b> Zip (	Code	
									FL			
office or r	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the of the of the office of t	ate of Florid	da. Such change w	as authori	ized b	y th	amed corpo e corporation	pration submits this statement for the on's board of directors. I hereby acce	purpose of opt the app	changing it ointment as	ts registered registered	
SIGNATURE	Signature, typed or printed natural registered		,									
12,	OFFICERS				tered Ag	Jerk s	agnature require	d when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	DIDECTOR	20 IN 12	
TITLE	<b>P</b>	MIND DITTE	DELETE		.1 TITLE		<u> </u>	ABBITIONS/CHANGES TO OIT	ULINO AINL	Change.	Addition	
NAME	BURKETT, JR., ORIS L		CJ servic		2 NAME					onlingo		
STREET ADDRESS 8421 SW 23RD PLACE			1.3 SIREFF ADDRESS			nacee						
CITY-ST-ZIP	GAINESVILLE FL 32607											
TITLE	ST		□ DELETE			1.4 City-St-7iP 2.1 Title				Change	Addition	
NAME	BURKETT, PATRICIA M		_									
STREET ADDRESS	8421 SW 23RD PLACE		23			T ADI	DRESS					
CITY-ST-ZIP	GAINESVILLE FL 32607				4 CITY-							
TITLE			DELFTE		1 TITLE	L	<del></del>		· · · ·	Change	☐ Addition	
NAME				3.	2 NAME					-		
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CITY-ST-ZIP				3.	4 CITY-	\$1-2	ne				•	
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NAME				4.	4. 2 NAME							
STREET ADDRESS				4.	3 \$1REE1	T ADE	DRESS					
CITY-ST-ZIP			···-	4.	4 CITY - 8	ST - ZI	IP .					
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NAME				5.	2 NAME							
STREET ADDRESS				5.	3 STREET	; ADF	DRESS					
CITY-ST-ZIP			·		4 CHY-S	ST - Zi	IP					
TITLE			☐ DELETE		1 TITLE					Change	☐ Addition	
NAME				6:	2 NAME							
STREET ADDRESS				6:	3 STREET	I ADD	ORFSS					

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 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.