

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000092500 (2)
 1. Corporation Name
SWEETWATER EAST INVESTMENT CO.



Principal Place of Business 684 DYSON ROAD HAINES CITY FL 33844	Mailing Address 684 DYSON ROAD HAINES CITY FL 33844
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/28/1997	
21 Sulte, Apt. #, etc.	22 City & State	26 Sulte, Apt. #, etc.	27 City & State	4. FEI Number 59-3474924	Applied For <input type="checkbox"/> Not Applicable
23 Zip	24 Country	28 Zip	29 Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
KING, LAWRENCE B 684 DYSON ROAD HAINES CITY FL 33844				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	FL
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No					

g. Name and Address of Current Registered Agent
**KING, LAWRENCE B
684 DYSON ROAD
HAINES CITY FL 33844**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code **FL**

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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D Dir/Pres/Treas <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, LAWRENCE B	1.2 NAME	
STREET ADDRESS	483 SWEETWATER WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	HAINES CITY FL 33844	1.4 CITY-ST-ZIP	
TITLE	Dir/V.P. <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Bard, Ronald	2.2 NAME	
STREET ADDRESS	553 Clubhill Dr.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Haines City, FL 33844	2.4 CITY-ST-ZIP	
TITLE	Dir/V.P. <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dittmer, Norman	3.2 NAME	
STREET ADDRESS	440 Sweetwater Way	3.3 STREET ADDRESS	
CITY-ST-ZIP	Haines City, FL 33844	3.4 CITY-ST-ZIP	
TITLE	Dir/V.P. <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Wolff, Helmut	4.2 NAME	
STREET ADDRESS	423 Harbourview Dr.	4.3 STREET ADDRESS	
CITY-ST-ZIP	Haines City, FL 33844	4.4 CITY-ST-ZIP	
TITLE	Dir/Sec. <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stebbe, Robert	5.2 NAME	
STREET ADDRESS	630 Watercrest Dr.	5.3 STREET ADDRESS	
CITY-ST-ZIP	Haines City, FL 33844	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: *Lawrence B King* **4/27/98**

CR2E034 (10/97)