

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

3

DOCUMENT # **V71432** (1)

1. Corporation Name
BEELINE INVESTMENTS, INC.

95 APR -4 AM 10:40

Principal Place of Business
**401 E. SEMORAN BLVD.
CASSELBERRY FL 32707**

Mailing Address
~~401 E. SEMORAN BLVD.
CASSELBERRY FL 32707~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/15/1992

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3183513

Applied For
 Not Applicable

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 has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21. **21** Suite, Apt. #, etc.

22. **22** City & State

23. **23** Zip Country

24. **24** **25** **29** **30**

2a. Mailing Address

26. **26** **200 S. Orange Ave.**

27. **27** Suite, Apt. #, etc.

27. **27** **Suite 2300**

28. **28** City & State

28. **28** **Orlando, FL**

29. **29** Zip Country

29. **29** **32801** **30** Country

9. Name and Address of Current Registered Agent

~~THE PRENTICE HALL CORPORATION SYSTEM INC
110 N MAGNOLIA DR
SUITE 105
TALLAHASSEE FL 32301~~

10. Name and Address of New Registered Agent

81. Name
A.G.C. Co.

82. Street Address (P.O. Box Number is Not Acceptable)
200 S. Orange Ave.

83. **Suite 2300**

84. City
Orlando **FL**

85. Zip Code
32801

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 607.0503, Florida Statutes.

SIGNATURE **A.G. Thomas** **3/30/95**
By: **A.G. Thomas** **3/30/95**
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**

NAME **KELLEY, ROBERT**

STREET ADDRESS **401 E SEMORAN BLVD**

CITY-ST-ZIP **CASSELBERRY FL**

TITLE **D**

NAME **VEGLE, CHARLES**

STREET ADDRESS **4825 E LAKE DR**

CITY-ST-ZIP **WINTER SPRINGS FL**

TITLE **D**

NAME **VEGLE, JIM**

STREET ADDRESS **2752 LAKE HOWELL LN**

CITY-ST-ZIP **WINTER PARK FL**

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. Further, I 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Robert Kelley** **Robert T. Kelley** **2-7-95** **(407) 762-2977**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR