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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

688096

(7)

**FAMLEE INVESTMENT COMPANY** 

Mailing Address

**FILED** 

Jan 21 1998 8:00am

Secretary of State

P. O. BOX 620365  ORLANDO FL 32862  ORLANDO FL 32862  ORLANDO FL 32862		TAL DRIVE	-		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  09/18/1980			
2. Principal Place of Business	2a. Mailing Address		_		4. FEI Number	Applied For		
d	26				59-2041290	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 25	Zip Country <b>29 30</b>				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
DENYER, RAYMOND G.			81	Name				
7050 AUGUSTA NATIONAL DRIVE ORLANDO FL 32812			82	Street Address (P.O. Box Number is Not Acceptable)				
			83					
			84	City	FI	85 Zip 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

agent. I ar	egistered agent, or both, in the State of Florida. In familiar with, and accept the obligations of, Se	Such change was at ection 607.0505, Flor	ithorized by the corpora ida Statutes.	ition's board of directors, I hereby accept t	the appointment as	registered i
SIGNATURE .	Signature, typed or printed name of registered agent and title if ap	olicable. (NOTE.	Registered Agent signature requ	lired when reinstating)	DATE	<del></del>
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 12
TITLE	PD	DELETE	1.1 TITLE		Change	Addition:
NAME	LEE,RICHARD T		1.2 NAME			
STREET ADORESS	7050 AUGUSTA NAT'L DR		1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE		Change	Addition
NAME	LEE,II, THOMAS G		2.2 NAME			İ
STREET ADDRESS	7050 AUGUSTA NAT'L DR		2.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY-ST-ZIP			
TITLE	VDT	☐ DELETE	3.1 TITLE		Change	Addition
NAME	Lee,Kathleen S		3.2 NAME			i
STREET ADDRESS	7050 AUGUSTA NAT'L DR		3.3 STREET ADDRESS			
CITY - ST - ZIP	ORLANDO FL		3.4. CITY-ST-ZIP			
TITLE	V	DELETE	4.1 TITLE		Change	Addition
NAME	LEE, ELIZABETH M.		4. 2 NAME			
STREET ADDRESS	7050 AUGUSTA NAT'L DR		4.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		4.4 CITY - ST - ZIP		<u> </u>	<u> </u>
TITLE	VD	DELETE	5.1 TITLE		L Change	Addition
NAME	Barrow, Lorrayne L		5.2 NAME			
STREET ADDRESS	7050 AUGUSTA NAT'L DR		5.3 STREET ADDRESS			į
CATY - ST - ZIP	ORLANDO FL		5.4 CITY - ST - ZIP		<u> </u>	
TITLE	V	☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME	WAUGH, MICHELLE L.		6.2 NAME			
STREET ADDRESS	7050 AUGUSTA NAT'L DR		6.3 STREET ADDRESS			ļ
CITY_ST.7IP	ORLANDO FI		64 CITY+ST+7IP			i

I hereby certify that the informatic indicated on this annual report or officer or director of the corporati Block 12 or Block 13 if changed.

SIGNATURE: