

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

FILED

**Feb 05 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 380133 (9)
 1. Corporation Name
ORANGE-CO OF FLORIDA, INC.



Principal Place of Business 2020 US HIGHWAY 17 SOUTH BARTOW FL 33830 US	Mailing Address P.O. BOX 2158 BARTOW FL 33831-2158 US
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	25 Country
29 Zip	30 Country

3. Date Incorporated or Qualified 04/08/1971	
4. FEI Number 59-1320991	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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	

9. Name and Address of Current Registered Agent

ALEXANDER, JOHN R
2020 US HWY 17 S
BARTOW FL 33830

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

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MOONEY, GENE	
STREET ADDRESS	2020 U.S. HWY 17 S.	
CITY-ST-ZIP	BARTOW FL	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	GRIFFIN, BEN H III	
STREET ADDRESS	700 SOUTH ALT HWY 237	
CITY-ST-ZIP	FROSTPROOF FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LESTER, BENARD W	
STREET ADDRESS	840 S. MAIN, ST.	
CITY-ST-ZIP	LABELLE FL	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	BRUWELHEIDE, DALE A	
STREET ADDRESS	2020 US.S HWY 27 S.	
CITY-ST-ZIP	BARTOW FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MCBEE, BERNARD	
STREET ADDRESS	2020 US HWY 17 S	
CITY-ST-ZIP	BARTOW F;	
TITLE	DSV	<input type="checkbox"/> DELETE
NAME	ALEXANDER, JOHN R.	
STREET ADDRESS	2020 U.S. HWY. 17 S.	
CITY-ST-ZIP	BARTOW FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	21P 33830
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	700 SOUTH ALT HWY 27
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	21P 33935
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	2020 US HWY. 17S.
4.4 CITY-ST-ZIP	21P 33830
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	FL, 33830
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	21P-33830

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 on an attachment with an address.

SIGNATURE _____

CR2E034 (10/97)

ATTACHMENT TO DOCUMENT #380133

PROFIT CORPORATION ANNUAL REPORT - 1998

DOCUMENT # 380133

Orange-co of Florida, Inc.

Section 13. - Officers and Directors - Additions

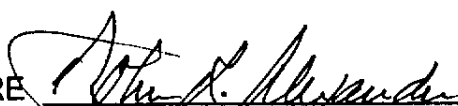
Title: V
Name: Clement, Edward
Street Address: 2020 US Hwy 17 S
City-ST-ZIP: Bartow, FL 33830

Title: V
Name: Cummins, Wesley
Street Address: 2020 US Hwy 17 S
City-ST-ZIP: Bartow, FL 33830

Title: V
Name: Newlin, Jerome
Street Address: 2020 US Hwy 17 S
City-ST-ZIP: Bartow, FL 33830

Title: V
Name: Robins, Donald
Street Address: 2020 US Hwy 17 S
City-ST-ZIP: Bartow, FL 33830

Title: AS
Name: Lyons, Kim
Street Address: 2020 US Hwy 17 S
City-ST-ZIP: Bartow, FL 33830

SIGNATURE  |-30-98 941 533 0551
John R. Alexander Date Daytime Phone #