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

P94000086563 (1)

FILED May 05 1998 8:00am Secretary of State

PICKE	II SIEEL, ING.							
Principal Plac	e of Business	Mailing Addre	oss			- 10414001 110 1011 0101 0111 0011 0011	18119 BAIGI BIHAT CII	IEO (1111 (1 50)
10402 CYPRESS ROAD 10402 CYPRESS ROAD								
LEESBURG FL 34788 LEESBURG FL 34788						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	001702	
						11/28/1994		İ
—	Place of Business	2a. Mailing Ac	ldress			4. FEI Number	Ar	oplied For
21 Sulta Act	# ata	26	Suite, Apt. #, etc.			59-3288175		ot Applicable
Sulte, Apt.	50. #, etc.					5. Certificate of Status Desired	\$8.75	Additional equired
	City & State City & State					6. Election Campaign Financing	\$5.00	•
23	28					Trust Fund Contribution	Added 1	
Zip	Country	Zip		Country		8. This corporation owes or has paid the	current year Int	angible
24	25	29	30	·		Personal Property Tax due June 30.		No No
DIC.	9, Name and Address of Curre	nt Registered Agen	ot	81	None	10. Name and Address of New Registers	d Agent	
	CKETT, L. MARVIN 402 CYPRESS ROAD			01	Name			
	ES BUR G FL 34788			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
100	2000110 12 04700			83				
•								
				84	City	F	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Flo	orida Statutes, th	ne above	-named corp	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing it	s registered
agent. I a	im familiar with, and accept the oblig	rations of, Section 60	07.0505, Florida	Statutes	лие согрогац 3.	lion's board or directors, I hereby accept the a	ppointment as	registerea
SIGNATURE								
12.	Signature, typed or printed name of registered ag	ent and title if applicable ID DIRECTORS		istered Age	nt signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D			1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
NAME	PICKETT, L. MARVIN			1.2 NAME			onlango	
STREET ADDRESS	10402 CYPRESS ROAD			1.3 STREET	ADDRESS			
CITY-ST-ZIP	LEESBURG FL 34788			1.4 CITY-S	T-ZIP			[5
TITLE	D		DELETE	2 1 TITLE			Change	Addition C
NAME	PICKETT, MARGIE P			22 NAME				
STREET ADDRESS	10402 CYPRESS ROAD		[]:	2 3 STREET	ADDRESS	40 11		
CITY - ST - ZIP	LEESBURG FL 34788			2. 4 CITY-S	ST - ZIP			
TITLE		Ш		3.1 TITLE			∐ Change	☐ Addition
NAME OTRECT LODGEGG				3.2 NAME				
STREET ADDRESS				3.3 STREET.				
CITY-ST-ZIP TITLE				3.4. CITY - S 4.1 TITLE	1-ZIP	<u> </u>	Change	Addition
NAME		ب	i i	4. 2 NAME			- Onoriga	CONTINUE TO STATE OF THE STATE
STREET ADDRESS				4.3 STREET	ADORESS			
CITY-ST-ZIP				4.4 CITY - S1				
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME			:	5.2 NAME				
STREET ADDRESS				5 3 STREET	ADDRESS			ľ
CITY-ST-ZIP				5.4 C(TY - S)	r-ZIP			
TITLE			DELET E	6.1 TITLE			☐ Change	Addition
NAME			6	6.2 NAME				
STREET ADDRESS	•		6	5.3 STREET A	Address			
CITY-ST-ZIP	395-0 10 10			5.4 CITY - ST				
16. I narahy c	eruny that the information supplied w	ath this tilina does n	ot qualify for the	exempt	inn stated in !	Section 119 07(3)(i) Florida Statutos, Liurther	cortify 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 eath; 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.