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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

217906

(7)

1. Corporation Name
CENTRAL FLORIDA INC

Principal Place of Business	Mailing Address
DANIEL M. HUNTER	Daniel M. Hunter
P.O. BOX 340 - 243 W. PARK AVENUE	P.O. Box 340 - 243 W. Park Avenue
WINTER PARK FL 32789	Winter Park Fl 32789

WINTER PARK FL 32789		P.O. BOX 340 - 243 W. PARK AVENUE WINTER PARK FL 32789			Date incorporated or Qualified 12/08/1958	3a. Date of Last Report 05/01/1995		
		Mailing Address		4. FEI Number 59-1677162		Applied For Not Applicable		
Suite, Apt. #, etc	3.	26	Suite, Apt. #, etc.		<u> </u>	Certificate of Status Desired	11	75 Additional se Required
City & State		27	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	28	Zıp 30	Country	<u></u>	TIONGS CLEROTOR	™ 00	
24	25 Name and Address of Cu			7		10. Name and Address of New R	egistered Agent	
9	, Name Bild Address of Or	21101111103		81	Name			
	DANIEL M. ARK AVENUE			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
	ARK FL 32789			83				
				84	City		FL 65	·
	e provisions of Sections 607 agent, or both, in the State of accept the obligations of			above-i the corp	named corpo oration's boa	ration submits this statement for the pur ard of directors. I hereby accept the app	rpose of changing ointment as registe	its registered office ered agent. I am

SNATURE	inature, typed or printed name of registered agent and little if appli	catle (NC	OTE Registered Agent signature required v	when reinstating! DATE	
	of FICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	
LF .	PO	DELETE	1 1 TITLE	[] Chang	e LJ Addition
	HUNTER, DANIEL M.		1.2 NAME		
ME REE1 ADDRESS	243 W. PARK AVENUE		1.3 STREET ADDRESS		
	WINTER PARK FL		1.4 CITY-ST-ZIP		e
Y-ST-ZIP LF		DELETE	2 1 TITLE	Chang	e [] Addition
ME			2 2 NAME		
			2 3 STREET ADDRESS		
REET ADDRESS			2 4 CITY-ST-ZIP		e [] Additio
Y-S1-ZIF		DELETE	3 1 10116	Chang	je 🔲 Additit
ME			3.2 NAME		
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14 - ST - 7 IP		DELETE	5 1 TITLE	Chan	ge □ vooru
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			5 4 CITY - ST - ZIP	T Char	ige 🗀 Additi
LE		DELFTE	6 1 TITLE	Char	ige [] Abbiti
ME			6.2 NAME		
REE1 ADDRESS			6.3 STREET ADDRESS		
ITY: ST-ZIP			6 4 CHY-ST-ZIP	or the exemption stated in Section 119.07(3)(k), Florida S	

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)(k), 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 certify 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/96 407-647-6

CR2E034 (12/95)