

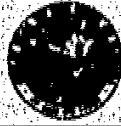
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # 238842 (9)

1. Corporation Name OLD LAKE COUNTY GROVE INC

Principal Place of Business and Mailing Address: C/O M SADLER OAKLAND WINTER GARDEN RD PO BOX 215 OAKLAND FL 34780-0215

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/25/1960
3a. Date of Last Report: 03/16/1994
4. FEI Number: 59-0923211
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business and Mailing Address (21-28)
24. Zip, 25. Country, 29. Zip, 30. Country

9. Name and Address of Current Registered Agent: SADLER, R. D OAKLAND-WINTER GARDEN RD OAKLAND FL 32760
10. Name and Address of New Registered Agent (81-85)

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: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include titles and names for Meyer, William J; Sadler, R Douglas; Sadler, Mame; Sadler, Mame.

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 110.07(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 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 (reappoint) or on an attachment with an address.

SIGNATURE: William J. Meyer, Sec'y APR 11 1995 (407) 682-2647