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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 246321

(4)

THRIFTWAY PROPERTIES OF SEBRING INC

Principal Place of Business 3601 CYPRESS GARDENS RD. F WINTER HAVEN FL 33884 US 2. Principal Place of Business 21 Suite, Apt. #, etc.			Mailing Address 1308 LAKE MIRROR TERR NW WINTER HAVEN FL 33881-2338 US 2a. Mailing Address 26 /308 Mirror Terr NW Suile, Apt. #, etc.				IW	3. Date Incorporated or Qualified 04/04/1961 3a. Date of Last Report 04/04/1961 04/26/1996 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State			City & State					6. Election Campaign Financing	\$5.00 May Be		
23 Zip	Country	28	Z ip	C	Countr	у		Trust Fund Contribution 8. This corporation has liability for in			
24	25	29		30					Yes [. 100.002,
	9. Name and Address of Currer	nt Regis	tered Agent					10. Name and Address of New Reg	istered A	gent	
	dor, James O.				81	l Name					
	LAKE MIRROR TERR.NW						ss (P.O. Box Number is Not Acceptable)				
WINTER HAVEN FL 33881			83			130	28	8 MIRROR TERRACE NW			
					0.0	'					
					84	City		- -	FI	85 Zip	Code
44 Dozestant	to the provisions of Santions 607.050	12 and 6	207 1509 Florida Statute	oc the		/o named	00000	ration submits this statement for the po		abanaina i	to registered
office or r	egistered agent, or both, in the State	of Flori	da. Such change was a	authori	zed b	y the corp	oratio	nation submits this statement for the points board of directors. I hereby accept	t the appo	shanging ii sintment as	registered
agent La	m familiar with, and accept the oblig	ations o	f, Section 607.0505, Flo	orida S	Statute	9\$.					
SIGNATURE	Signature, typical or printed name of registered age	unt and little	If anylicable (NOT)	F Rocies	orad A	ant cional ya		1 when reinstating)	DATE		
12.	OFFICERS AN		···		3.	Jerit signa.ore	required	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	RS IN 12
THE	PD	D (21) 12	DELETE		1 TITLE	<u>-</u>				Change	Addition
NAME	KONDOR, PHYLLIS E		_		2 NAME					~	_
STREET ADORESS	1308 LAKE MIRROR TERRACE				_	T ADDRESS	/2	OF MIRROR TERM	HEE A	υw	
City-S1 ZiF	WINTER HAVEN FL				_	ST(ZIP)	u	08 MIRROR TERM DINTER HAVEN, F	7 3	3861	
TITLE	STD		DELETE		1 TITLE	J. C				Change	☐ Addition
NAMÉ	JAMES O. KONDOR			2.	2 NAME					•	•—
STHEET ADDRESS	1308 LAKE MIRROR TERRACE			6	3 PREF	T ADDRESS	13	BOX MIRROR TER DINTER HAVEN, F	RALB	NW	
C(1)Y+S1 201	WINTER HAVEN FL			·	_	S (ZIP)	u	DUNED HAVEN F		2881	
TOTALE			DELETE		1 TITLE	****		- INTERCITABLE AND THE PROPERTY OF THE PROPERT		Change	Addition
NAME				3.	2 NAME						
STREET ADORESS				3.	3 STREE	T ADDRESS					
C(Ty+S1+2)F				3.	4. CITY	-ST-ZIP					
THLE			DELETE		1 TITLE			· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				4.	2 NAMI						
STREET ADDRESS				4.	3 STREE	T ADDRESS					
CHY-ST ZIF				4.	4 CITY -	ST-ZIP					
THILE			☐ DELETE	5.	1 TITLE					Change	Addition
NAME				5.	2 NAME						
STREET ADDRESS				5.	3 STREE	T ADDRESS					
CHY-S1 ZiF				5.	4 CITY -	ST-ZIP					
THLE			☐ DELETE	6.	1 TITLE					Change	Addition
NAME				6.	2 NAME						
STREET ADDRESS				6.	3 STREE	T ADDRESS					
CHY-ST-ZIF						ST-ZIP					
14. I do herel informatir	by certily that the information supplies an indicated on this annual report or the second of the second or the sec	id with t	his filing does not qualif nental annual renort is ti	fy for t rue an	he ex d acc	emption st curate and	tated i that n	in Section 119.07(3)(i), Florida Statutes ny signature shall have the same legat	. I further effect as	certify that if made un	the ider oath: that
Lam an o appears i	flicer or director of the corporation of the Block 12 or Block 231 changed, o	r the red ir on an	ceiver or truetce emplow attach an add	ered t	o exe	cute this r	eport	ny signature shall have the same legal as required by Chapter 607, Florida St	atutes, an	d that my	name

SIGNATURE:

941-324-7711

FILED

Apr 02 1997 8:00am

Secretary of State

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