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

## \*PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

## Sandra J. Mortiam

ANNUAL REPORT 1997		Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
	MENT # 259203 LEN AND COMPANY	(8)		77	
Principal Plac	e of Business	Mailing Address			
38 ORANGE AVE. LAKE WALES FL 33853		C/O CHERYL M. MARTIN. CPA ONE SCENIC CENTRAL. STE 106 LAKE WALES FL 33853-6115			
				3, Date Incorporated or Qualified 05/21/1962	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-1025234	Applied For Not Applicable
Suite, Apt. #, etc.		Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28] 	Country	Trust Fund Contribution  8. This corporation has liability for in	
24	9. Name and Address of Curren	29   nt Registered Agent	30 POLK	Florida Statutes  10, Name and Address of New Reg	Yes No
	EN, C. EVERETT	10 110 20 110 110 110	81 Name	10, trailly also standard at trail a	ISIONAN WANT
808 CARLTON AVE.			82 Street Addr	Street Address (P.O. Box Number is Not Acceptable)	
LAK	E WALES FL. FL 33853		83		
			84 City		<b>85</b> Zip Code
41 Pursuant	to the provisions of Sections 607.0%	02 and 607 1508. Florida Statute		poration submits this statement for the pur	
office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Such change was a lations of, Section 607.0505, Florida	uthorized by the corporati rida Statutes.	ion's board of directors. Thereby accept	the appointment as registered
SIGNATURE					
12.	Signature typod or printed name of registereo agr OFFICERS AN	OT AND THE IT SUPPLIES (NOTE	Registered Agent signature require 13.	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12
TITLE	PDS	DELETE	11 HAE		Change Addition
NAME STREET ADDRESS	ALLEN,C EVERETT 806 CARLTON AVENUE		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WALES FL. 33853	•	1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2 1 TITLE	44 Marian	Change Addition
NAME e			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS   2.4 CHY-SH-ZIP		
TITLE		DELETE	31 Title		Change Addition
NAME			32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS	•	
CITY-ST-ZIP TITLE		DELETE .	3.4 City-S1-ZiP 4.1 Title		Change Addition
NAME		C. Occole	4.1 IIILE 4.2 NAME	000000220	3680
STREET ADDRESS			437,3601,8608885	000002208 -06/11/9701087	2028
C11Y-S1-Z#			4.4 City - \$1- ZiP	***165.00	/
TITLE		DELETE	5 1 TITLE		Change L Addition
STREET ADDRESS			53 STREET ADDRESS	<	1/0/3/92
CITY+ST-ZIP			5 4 CITY - ST - 21P	Ã	ナノレノツリナ
TITLE	<del></del>	DELETE	61 TITLE	7	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
City-st-zip	ov cartify that the internation supplied	with this filing does not qualify	for the exemption stated	in Section 119.07(3)(i), Florida Statutes.	I further cortily that the
information I am an of appears in	n indicated on this annual report or s ficer or director by the corporation or n Block 12 or Block 13 if changes, or	upplemental annual report is tru the seeiver or trustee empowe fr an attack part with an older	ie and accurate and that red to execute this report ass.	my signature shall have the same legal c as required by Chapter 607, Florida Sta	effect as if made under oath; that tutes; and that my name

**FILED** 

Jun 03 1997 8:00am