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

CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 319871

(0)

NOR-RAL,INC.

Principal Place of Business	Mailing Address

Jan 15 1998 8:00am Secretary of State



	PARK FL 32789 WINTER PARK FL 32789										
								DO NOT WRITE IN THIS	SPACE		
								3. Date incorporated or Qualified		-	
								08/14/1967			
2. Principal Pl	al Place of Business 2a. Mailing Address					4. FEI Number		pplied For			
21			26					59-1171126		lot Applicable	
Suite, Apt. #, etc.			ļ	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	
22			27					3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	Fee F	Required	
City & State			<u> </u>	City & State				6. Election Campaign Financing		May Be	
23	28						Trust Fund Contribution		to Fees		
Zip	ļ. <u></u>	Country	<u> </u>	Zip Country			1	8. This corporation owes or has paid the current year Intangible			
24	25	1		29 30				Personal Property Tax due June 30. Yes No			
		d Address of	Current Regi	stered Agent	-	10. Name and Address of New Registered Agent					
ì	ff, ralph p					81 Name					
j 211	1 HOWARD D)R				82 Street Address (P.O. Box Number is Not Acceptable)					
WIN	iter park fi	L 32789									
						83		•		· I	
						84	City		85 Zip	Code	
							[FL	. `		
11. Pursuant t	to the provisions	s of Sections	607.0502 and	607.1508, Florida Statu	ites, the al	bove	e-named cor	rporation submits this statement for the purpose o ation's board of directors. I hereby accept the app	f changing	its registered	
office of re	egistered agent m familiar with.	t, or both, in tr and accept th	ne State of Flor ne obligations (rida. Such change was of. Section 607.0505. F	autnorized Torida Stat	a by lutes	y the corpora s.	ation's board of directors. I hereby accept the app	pointment a	s registered	
	The second second	= =000p: 11	- 00/1ga(141 (0)	or, ••••			. .				
SIGNATURE	Signature, typed or p	nnted name of reg	stered agent and titl	le if applicable. (NO	TE: Registered	d Age	ent signature requ	ulred when reinstating) DATE			
12.		OFFICE	RS AND DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	PĎ			DELETE	1,1 13	TLE	_		Change	Addition	
NAME [HUFF,RALP	ΉP			1.2 NA	ME				[:	
STREET ADDRESS	2111 HOW	ard dr.			1,3 \$7	REET	ADDRESS				
CITY-ST-ZIP	WINTER PA	vrk fl			1.4 CI	TY-S	iT-ZIP				
TITLE				DELETE	2.1 TI				Change	Addition	
NAME					2.2 NA	ME				Ì	
STREET ADDRESS					2.3.51	BEET	ADDRESS				
CITY-ST-ZIP							ST-ZIP			1	
TITLE				DELETE	3.1 Til		31-231		Спалде	Addition	
NAME					3.2 N/		1				
STREET ADDRESS					•		ADDRESS			1	
					1		- 1				
CITY-ST-ZIP				DELETE	3.4. U	_	ST-ZIP		Change	Addition	
í f				occur			1		- orange	Car Addition	
NAME					4. 2 N					Ì	
STREET ADDRESS							ADDRESS			J	
CITY-ST-ZIP				Logicae	4.4 CI	_	T-ZIP	<u></u>	05	Aden	
TITLE				DELETE	5.1 TO		ļ		☐ Change	Addition	
NAME					5.2 NA		1			j	
STREET ADDRESS					5.3 ST	REET	ADDRESS				
CITY - ST - ZIP					5.4 CT	TY~\$	T- ZIP	<u> </u>			
TITLE				DELETE	6.1 TI	ſŒ	1	•	☐ Change	Addition	
NAME					6.2 NA	ME					
STREET ADDRESS					6.3 ST	REET	ADDRESS				

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I). 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.