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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

321340

(2)

SOUTHRIDGE, INC.

Principal Place of Business

800 E. EUCLID AVE.

Mailing Address

800 E. EUCLID AVE.

## **FILED** May 05 1998 8:00am Secretary of State



P.O. BOX 546 DELAND FL 32721-0546		P.O. BOX 546 DELAND FL 32721-0546			DO NOT WRITE IN	THIS SPA	CE	
					3. Date Incorporated or Qualified 09/25/1967			
	ace of Business	2a. Mailing Address	- 00.	( 1)	A ELIAL male on		A	pplied For
21 500	D.E. Luciati		iali.	7 41	59-1172245		N	lot Applicable
Suite, Apt.	#, etc. 	Suite Apt. #, etc.			5. Certificate of Status Desired	<b>) \$</b>		Additional lequired
City & State	1 C	City & State	) L	7/	6. Election Campaign Financing		\$5.00	May Be
23 Del	aria FL	28 DE LOU	d T		Trust Fund Contribution	]	Added	to Fees
ヹ <sup>ヹ</sup> ゅる'	124 Country	32724	Country	•	8. This corporation owes or has paid the			
24	9. Name and Address of Curre		30		Personal Property Tax due June 30.  10. Name and Address of New Regist	<u>W</u> Y		No
CAL		it riogistereo Agent	81	Name	10. Name and Address of New Regist	ared Age	nt	
GARDNER, RICHARD M 800 E EUCLID AVE								
DELAND FL 32720			B2	Street A	ddress (P.O. Box Number is Not Acceptable)			
UCI	MAD LE 25/50		83					
			84	City		FL <sup>8</sup>	5 Zip	Code
11. Pursuant t	o the provisions of Sections 607 050	)2 and 607 1508. Florida Statutes	the above	a-named c	corporation submits this statement for the purpo	200 05 001	naina	ite registered
DITICE OF RE	e <b>gistered ag</b> oni, or both, in the Stale	e of Florida. Such change was auf	thorized by	the corpo	pration's board of directors. I hereby accept the	e appoint	nent as	registered
-	n familiar with, and accept the oblig	ations of, Section 607.0505, Florii	da Statutes	3.				
SIGNATURE	Signature: typical or printed name of registered age	ent and title if applicable (NCTE: I	Renistered And	nt signature M	equired when reinstating) D	IATE.		
12.		D DIRECTORS	T 13.		ADDITIONS/CHANGES TO OFFICERS		RECTO	RS IN 12
TITLE	8	DELETE	1.1 TITLE				Change	Addition
NAME	GARDNER, E		1.2 NAME	Ĭ				
STREET ADDRESS	201 ELM DRIVE		1.3 STREET	ADDRESS				
CITY-ST-ZIP	LIGONIER, PA 00000		1.4 CITY-S					
TITLE	VPT	☐ DELETE	2.1 TITLE				Change	Addition
NAME	GARDNER, R.M.		2.2 NAME					
STREET ADDRESS	800 E EUCLID AVE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	DELAND, FL 00000		2. 4 CITY- 5					
TITLE	P	DELETE 3		,, <u>.</u>		П	Change	Addition
NAME	GARDNER, W M		3.2 NAME					
STREET ADDRESS	201 ELM DRIVE		3.3 STREET	ADDRESS				
CITY-ST-ZIP	LIGONIER, PA 00000		3.4. C(TY - S					
TITLE		DELETE	4.1 TITLE	-			Change	Addition
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-SI					
TITLE		DELETE	5.1 TITLE			П	Change	Addition
NAME			5.2 NAME	ŀ		_		
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - ST					
TITLE		DELETE	6.1 TITLE			TI.	Change	Addition
NAME		_	6.2 NAME					
STREET ADDRESS			6.3 STREET	ANDRESS				
CITY-ST-ZIP			6.4 CITY - ST					
14. I hereby ce	ortify that the information supplied w	ith this filing does not qualify for t	he exempt	ion stated	in Section 119.07(3)(i), Florida Statutes, I furth	er certify	hat the	information
officer or d	i <b>n this a</b> mhual report or supplementa	al annual report is true an <b>d accur</b> a- giver or trustee empower <b>ed to</b> exe	ate and tha	it my siana	ature shall have the same legal effect as if mac equired by Chapter 607, Florida Statutes; and	ta undar d	sath: th	atlam an
	$\sim C_{\rm c} + C_{\rm c}$		•		A 1 / 1	_		