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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

LILED
Apr 25 1997 8:00am
Secretary of State

EH ED

DOCUMENT # 364102 1. Corporation Name SUWANNEE RIVER COVE INC Principal Place of Business RT. 3 BOX 120 BRANFORD FL 32008 RT. 3 BOX 120 BRANFORD FL 32008							
				3. Date Incorporated or Qualified 05/15/1970		ate of Last 01/1996	•
2, Por cipal	Pace of Business	2a. Mailing Address		4. FEI Number	1 00/0		Applied For
21		26		59-1405366			Not Applicable
Suite Ap	t # etc	Suite, Apt. #, etc.	8873 St.	5. Certificate of Status Desired			Additional Required
22 City & St	9,0	City & State	08-21,	6. Election Campaign Financing			May Be
23		28		Trust Fund Contribution			d to Fees
Zīp ∵j	Country	Zip	Country	8. This corporation has liability for i			s. 199.032,
24	25 g. Name and Address of Curre	29 nt Registered Agent	30	Florida Statutes 10. Name and Address of New Re	Yes [
LA	RFEE, BETTY LOUISE		81 Name				
	. 3 BOX 120		82 Street Add	dress (P.O. Box Number is Not Acceptab)(a)		
	ANFORD FL 32008			dieda (r.o. box jadinosi is not Acceptab	,10)	بروداند	
			83				
			84 City		F- 1	85 Zij	p Code
					FL		
	if to the provisions of Sections 607.056 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607,1508, Florida Stati e of Florida Such change was gations of, Section 607,0505, F	ites, the above-named cor authorized by the corpora lorida Statutes.	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of ot the app	changing ointment a	its registered as registered
SIGNATURE	Signary, special pointed hank of registeric ag OFFICERS AN	oort and title if applicable. (NO	TE Registered Agent signature requ		DATE	DIRECTO	ORS IN 12
SIGNATURE 12. THE	State - State of pointed to be of registric page OFFICERS AN	port and title if applicable. (NC	ITE Registered Agent signature required. 13. 1.1 TITLE	uired when reinstating)	DATE		ORS IN 12
SIGNATURE	States Special pointed have of regulational appropriate and OFFICERS AND VD MURFEE, SAMUEL E.	oort and title if applicable. (NO	TE Registered Agent signature requ	uired when reinstating)	DATE	DIRECTO	ORS IN 12
SIGNATURE 12. THE NAME	OFFICERS AN WORFEE, SAMUEL E.	oort and title if applicable. (NO	13. 1.1 TITLE 1.2 NAME	uired when reinstating)	DATE	DIRECTO	ORS IN 12
SIGNATURE 12. THE SAME SIRG LADDRESS	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000	oort and title if applicable. (NO	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	uired when reinstating)	DATE	DIRECTO	ORS IN 12
SIGNATURE 12. THE SIRC LANDRESS CHY-51-76 THE NAME	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE	cet amotide il applicable. (NO NO DIRECTORS	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-Zip 2.1 TILE 2.2 NAME	uired when reinstating)	DATE	DIRECTO	ORS IN 12
SIGNATURE 12. 10.6 NAME SIRC LADDRIST 10.6 NAME SIRCE ADDRIST SIRCE ADDRIST	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120	cet amotide il applicable. (NO NO DIRECTORS	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS	uired when reinstating)	DATE	DIRECTO	ORS IN 12
SIGNATURE 12. THEF NAME SIRG LAUDRISS CIEV. 51-78 THEF NAME SIRED ADDRESS CIEV. SL 28	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000	cet and tide if applicable. (NO ID DIRECTORS DELETE DELETE	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	uired when reinstating)	DATE	DIRECTO	ORS IN 12 Addition
SIGNATURE 12. 10.4 NAME SHEET ADDRESS ODV-S1-70 TILLE NAME SHEET ADDRESS OUT-S1-70 TILLE THE	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST	cet amotide il applicable. (NO NO DIRECTORS	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	uired when reinstating)	DATE	DIRECTO	ORS IN 12 Addition
SIGNATURE 12. DIGE NAME SIRC LADDRIST COV. 51-70 THE NAME SIRCE ADDRISE GUY ST 20 GUY ST 20	VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M	cet and tide if applicable. (NO ID DIRECTORS DELETE DELETE	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	uired when reinstating)	DATE	DIRECTO	ORS IN 12 Addition
SIGNATURE 12. 1004 NAME SIBELAUDRES COV-51-760 TILLE NAME SIRED ADDRESS CUY-S1-26 TILLE TILLE DAME	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M	DELETE DELETE	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME	uired when reinstating)	DATE	DIRECTO	ORS IN 12 Addition
SIGNATURE 12. THE STREET ADDRESS CHY ST-76* THE SAME STREET ADDRESS CHY ST 26* THE DAME STREET ADDRESS STREET ADDRESS	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122	cet and tide if applicable. (NO ID DIRECTORS DELETE DELETE	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired when reinstating)	DATE	DIRECTO	ORS IN 12 Addition Addition
SIGNATURE 12. DICE NAME SIBELLAUDRES COV. SIL 700 TILLE NAME SIBELLAUDRES COV. SIL 700 TILLE NAME SIBELLAUDRES COV. SIL 700 TILLE NAME SIBELLAUDRES COV. SIL 700 TILLE NAME SIBELLAUDRES COV. SIL 700	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122	DELETE DELETE	13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	uired when reinstating)	DATE	DIRECTO Change Change	ORS IN 12 Addition Addition
SIGNATURE 12. 1004 NAME SIRE LADDRES COV. \$1-70 THE NAME SIRED ACDRES COV. \$1-70 THE NAME SIRED ACDRES COV. \$1-70 THE NAME SIRED LADDRES COV. \$1-70 THE NAME SIRED LADDRES SIRED LADDRES SIRED LADDRES	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	uired when reinstating)	DATE	DIRECTO Change Change	ORS IN 12 Addition Addition
SIGNATURE 12. 1004 NAME SIRECTADORES COLY, ST-ZIC THE NAME SIRECTADORES GUY, ST-ZIC THE NAME SIRECTADORES CHY, ST-ZIC THE NAME SIRECTADORES CHY, ST-ZIC THAM NAME SIRECTADORES CHY, ST-ZIC THAM CHY, ST-ZIC THAM CHY, ST-ZIC CHY, ST-ZIC CHY, ST-ZIC	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	COLUMN TO DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	uired when reinstating)	DATE	DIRECTO Change Change	DRS IN 12 Addition Addition
SIGNATURE 12. DOT NAME SIRG LADDRES COV. \$1-70. THE NAME SIRGE ACDRES COV. \$1-20. THE NAME SIRGE LADDRES COV. \$1-70. THE THE NAME SIRGE LADDRES COV. \$1-70. THE	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE	uired when reinstating)	DATE	Oirecto	DRS IN 12 Addition Addition
SIGNATURE 12. THE SIRE LAUDRESS COVEST-ZE THE SIRE LAUDRESS COVEST-ZE THE NAME	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	COLUMN TO DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired when reinstating)	DATE	DIRECTO Change Change	DRS IN 12 Addition Addition
SIGNATURE 12. THE FAME SIRE LADDRESS COVISTIVE THE SAME SIRE LADDRESS COVISTIVE THE MAME SIRE LADDRESS	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	COLUMN TO DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	uired when reinstating)	DATE	DIRECTO Change Change	DRS IN 12 Addition Addition
SIGNATURE 12. THE SIRE LAUDRESS COVEST-ZE THE SIRE LAUDRESS COVEST-ZE THE NAME	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	COLUMN TO DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired when reinstating)	DATE	DIRECTO Change Change	DRS IN 12 Addition Addition Addition Addition
SIGNATURE 12. THO F NAME SIRE LADDRES COVEST-70* THE NAME SIRE LADDRES COVEST-70* THE HAME SIRE LADDRES COVEST-70* THE	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	uired when reinstating)	DATE	DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition
SIGNATURE 12. THE FAME SIRE LADDRESS OUY STORE OUY	OFFICERS AN VD MURFEE, SAMUEL E. RT. 3 BOX 121 BRANFORD, FL 00000 PD MURFEE, BETTY LOUISE RT. 3 BOX 120 BRANFORD, FL 00000 DST SAPP, LURA M RT. 3 BOX 122 BRANFORD, FL 00000	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	uired when reinstating)	DATE	DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition

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.

SIGNATURE: Source Stuffe of Signing OFFICER OR DIRECTOR