## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

SUMMIT CONSULTING, INC.

**DOCUMENT #** 

497928

(2)

FILED Mar 12 1996 8:00 am Secretary of State

|--|

Distriction of the con-	were and the second	Mailing Address						I BARA DIDI ADDI	
Principal Place				_	<del>-</del> -				
2310 A-Z PARK ROAD 2310 A-Z PARK ROAD P.O. DRAWER 988 P.O. DRAWER 988									
P.O. Drawer 988 P.O. Drawer 98 Lakeland Fl 33802 Lakeland Fl 33									
	- *****	CHICCHING I C 60005			3. Date Incorporated or Qualifie	nd 3a. Date	of Last 1	Report	
					I	3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1995			
. Principal Pt.	2a. Mailing Address			4. FEI Number 59-1683711	<del>-</del>		Applied For		
26					59-1683/11		Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State			e, Apt. #, etc.		5. Certificate of Status Desired	5. Certificate of Status Desired S8.75 Additional Fee Required			
					6. Election Campaign Financing			O May Be	
		28			Trust Fund Contribution			ed to Fees	
Zφ	Country	Zip	Count	ry	8. This corporation has liability	for intangible tax			
	25	29	30		Florida Statutes 🔲 `	Yes □No			
	9. Name and Address of Curre	ent Registered Agent		<del></del>	10. Name and Address of New	w Registered A	gent		
DITT M	WILLIAMS D		8	1 Nan	ne				
	/ILLIAM B. Z Park road		8	2 Stre	et Address (P.O. Box Number is Not Accep	ress (P.O. Box Number is Not Acceptable)			
CANEDA	ND FL 33801		8	3					
			8	4 City			85 Z	ip Code	
				] 1	corporation submits this statement for the 's board of directors. I hereby accept the a	FL	1 1	,	
	OFFICERS AI	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
	Signature Typical or printers have of registered age.  OFFICE DO AT			ent signatu	re required when rainstating:	DATE			
	P · · ·	DELETE	1, 1 TiTL		The individual of the death of the		Change	Addition	
AE .	BULL, WILLIAM B.		1.2 NAM						
TELATIONESS	2310 A-Z PARK ROAD		1.3 STRE	T ADDRES	s				
F-S1-7IP	LAKELAND FL		1.4 CITY	ST-ZIP					
F	V	☐ DELETE	2 1 TITU				Change	Addition	
V:	WALL, RUSSELL L.		2.2 NAMI					<del></del>	
F-1 ADDRESS	2310 A-Z PARK RD.		23 STRE	T ADDRES	s				
r - 5.1 - 7.1P	LAKELAND FL VS		24 CITY	ST-7P					
₹	, -	☐ DELETE	3 1 TITLE				Change	Addition	
V <sub>1</sub>	COLLIS, GEORGA B. 2310 A-Z PARK ROAD		3 2 NAM						
EFT ADDRESS	LAKELAND FL		3.3 STR	ET ADDRES	SS .				
r-ST-2IP	CANCOMID I L		3 4 CITY						
f		☐ DELETE	4. 1 TITLE				Change	☐ Addition	
<sup>16</sup>			4.2 NAME						
FET ADDRESS				LADDRES	s				
<u> </u>		FT FC: FC	4.4 CITY -		<del></del>	4115	<del>}  </del> -	. <u> </u>	
F .		☐ Det ETE	5 1 TITLE	ŀ	9999917 -03/13/960 ***200.00	1037n <sup>3</sup>	7 hange	Addition	
ti nessece			5.2 NAME		***200.00	- <del></del> V1	•		
FELADORESS FEL 20				T ACIDRES	S				
r 51 <u>2</u> 16   F		☐ DELF1E	5 4 C/1Y-				Ch.:		
'  {			6 1 TiTLE				Change	☐ Addition	
E ADDRESS			6.2 NAME		<u>,                                    </u>				
or an			6.3 STREE	I ADDRESS	<b>&gt;</b>				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFIC

William B. Bull

2/23/96 Date

(941) 665-6060