

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

FILED
Apr 23 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **498737** (6)

1. Corporation Name
JOHN STALDER, INC.



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| Principal Place of Business 201 E. CENTRAL BLVD. P.O. BOX 593447 (ZIP 32859-3447) ORLANDO FL 32801-1918 US | Mailing Address 201 EAST CENTRAL BLVD P.O. BOX 593447 (ZIP 32859-3447) ORLANDO FL 32801-1909 US |
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| 3. Date Incorporated or Qualified 03/11/1976 | 3a. Date of Last Report 04/19/1996 |
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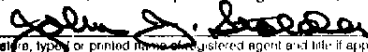
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|---|--|
| 2. Principal Place of Business 21 5520 Hansel Avenue Suite, Apt. #, etc. 22 B City & State 23 Orlando, FL Zip 24 32809 | 2a. Mailing Address 26 5520 Hansel Avenue Suite, Apt. #, etc. 27 B City & State 28 Orlando, FL Zip 29 32809 |
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| 4. FEI Number 59-1657756 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

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| 9. Name and Address of Current Registered Agent STALDER, JOHN J. 201 E. CENTRAL BLVD. ORLANDO FL 32801 | |
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| 10. Name and Address of New Registered Agent 81 Name Stalder, John J. 82 Street Address (P.O. Box Number is Not Acceptable) 5520 Hansel Ave. 83 B 84 City Orlando 85 Zip Code FL 32809 | |
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) **4/18/97**

| 12. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD STALDER, JOHN J. 201 E. CENTRAL BLVD. ORLANDO FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V STALDER, CHRISTOPHER J 201 E. CENTRAL BLVD. ORLANDO FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|--|---|
| 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I do 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.

SIGNATURE:  **4/18/97**

CR2E034 (9/96)