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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 502319

(7)

Principal Place of Business Mailing Address 1425 BELLEVUE AVE. DAYTONA BEACH FL 32114 Mailing Address 1425 BELLEVUE AVE. DAYTONA BEACH FL 32114					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal P	ace of Business	2a. Mailing Address				04/28/1976 4. FEI Number	Applied For
21		26				59-2503437	Not Applicat
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.				8.75 Additional Fee Required
City & State)	City & State				B. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	30	ountr	,	This corporation owes or has paid the current Personal Property Tax due June 30.	• — -
	g, Name and Address of Curre			$\overline{}$		10. Name and Address of New Registered Age	nt
SIGNATURE					City e-named cor y the corpora s.	rporation submits this statement for the purpose of chation's board of directors. I hereby accept the appoint	1
	Signature, typed or printed name of registered au				ent signature raqu	ulred when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	1:			ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTORS IN 12 Change Additi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TIMMER, WILLARD I 1428 BELLEVUE AVENUE DAYTONA BEACH FL 32114		1.3	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP			Custific FT Month
TITLE	8	DELETE		2.1 TITLE			Change
NAME	TIMMER, MARILYN 1428 BELLEVUE AVENUE		I	NAME			
STREET ADDRESS CITY-ST-ZIP	DAYTONA BEACH FL 32114			STREET 4 CHTY-	ADDRESS ST-ZIP		
TITLE		☐ DELET		TITLE			Change
NAME			3.2	NAME			
STREET ADDRESS			3.3	STREET	ADDRESS		
CITY-ST-ZIP			3.4	CITY-	ST-ZIP		
TITLE		☐ DELET	E 4.1	TITLE			Change
NAME			4	2 NAME			

CITY-ST-ZIP 14. 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.5 TITLE

☐ DELETE

DELETE

☐ Change

Change

Addition

Addition

FILED

Apr 28 1998 8:00am

Secretary of State