4-23-97 B-5259 -C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 550304

(0)

C.K. OF LARGO, INC.

Prince	dedic	Place	of	Busi	ness

FILED Apr 23 1997 8:00am Secretary of State



Principal Place of Business 7800 ULMERTON ROAD LARGO FL 34841-4057			Mailing Address 7800 ULMERTON ROAD LARGO FL 33771-4057													
						10/31/197	3. Date Incorporated or Qualified 10/31/1977 3a. Date of Last Report 04/25/1996				rt]				
2. Principal Place of Business]	2e. Mailing Address					4. FEI Number				Applie	d For]		
21			26				59-1769881 Not.				·	plicable	_			
Sufte, Apt. #, etc.		<u> </u>	Suite, Apt #, etc.				5. Certificate of	rtificate of Status Desired Status Desired Fee Required								
City & State			City & State						6. Election Campaign Financing \$5				5.00 May Be		٦	
23	······································			28					Trust Fund Contribution Added to F						_[
Zip				}		ountry	or mig porporation has make			for intangible tax under s. 199.032,						
24 337	9. Name and Address of Current			29 30		-1		Ftorida Statutes 10. Name and Address of New Re				· · ·				
5111			of Current He	egister	ea Agent		81	Ne	me S		Ocress of New F	tegistered /	\gent		···	-
	ON, DENNI						"		1		11/0N					1
7800 ULMERTON RD							82	Str	eet Addre	ess (P.O. Box Num	per is Not Accepta					7
	PETE BCH,						83			800 Ulme	rton Ka)				4
LAH	30 FL 3462	21					63									
1.5							84	Ci	у			P 1		p Cod		1
11. Pursuant	to the provin	ione of Coation	0.607.0602.0	nd CO7	14.00 Florido Cto	than the	1			AAUD poration submits this	atatament for the	FL		37		4
office or r	registered ag	ent, or both, in	n the State of F	lorida.	Such change wa	as authoriz	ed by	y the	corporati	ion's board of direc	tors. I hereby acc	ept the app	cnangini pintment	g its re as reg	gisterea stered	
agent. La	ım familiar wi	th, and accep	t the obligation	is of, Si	oction 607.0505,	Florida St	atutes	S .								
SIGNATURE	Clanature based	or probled page of	registered agent an	zi bilo if an	ralicoale U	VOIL Goodele	red Are	sul t.a	saluro positiv	ed when reinstaling)		DATE				
12.	Gigralo G. 19120		CERS AND D			13			atare registre		HANGES TO OFF		DIRECT	ORS IN	12	18
TALE	DPST				DELFTE	1.1	THLE						Chang	e [Addition	18
NAME	DILLON, E	ENNIS				1.2	NAME		1							
STREET ADDRESS		JUSTA AVE				1.3	STREET	ADDR	ISS							8
CITY-ST-ZIP	OLDSMAF	I FL					CITY-S									į
TITLE	DVP				DELETE		TITLE						Chang	e [Addition	76
NAME	DILLON, 8					22	NAME									
STREET ADDRESS	4750 AUG					2.3	STREET	ADDR	ESS							
CITY-S1-ZIP	OLDSMAF	î FL				2. 4	CHY-5	S1-71F								
TITĻE					☐ DELETE	3 1	TITLE						Chang	e L	Addition	7
NAME						32	NAME									
STREET ADDRESS						3.3	STREET	ADDE	ESS							
CITY-ST-ZIP							CO1Y-5	S1 - ZIF				·		· · · · · · · · · · · · · · · · · · ·		1
TATLE					☐ DELETE	4.1	TITLE						[_] Chang	6	Addition	
NAME]					4. 2	NAME									
STREET ADDRESS						4.3	STREET	ADDR	ESS							
CITY-ST-ZIP					T 22.22		CITY-S	T - ZIP								4
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NAME						5.2	NAMe									
STREET ADDRESS						5.3	STREET	ADOR	ESS							
CITY-ST-ZIP							CITY-S	7-7IP					 -		T	4
TITLE					☐ DELETE		TITLE						L Chang	e L	Addition	
NAME						6.2	NAME									
STREET ADDRESS						6.3	STREET	ADDR	ESS							-
CITY-ST-ZIP	<u> </u>						CITY-S				2777 E. 177-S.					_
I 14. I do heret	by certify tha	t the information	on supplied wi	th this f	ilina does not au	alify for th	e exe	moti	on stated	l in Section 119.07(3)(i), Florida Statu	tes. I further	certify th	at the		- 1

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal officet 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 childged, or on an attainment with an address.