COR ANNL	PROFIT PORATION JAL REPORT 1996	Sandra Secret	ARTMENT OF STATE B. Mortham tary of State CORPORATIONS		
1. Corporation	MENT # 5813 R PROPERTIES, INC.	68 (8)			
P.O. BOX 91	FLORENCE DR.	Mailing Address 108 S LAKE FLORENC P.O. BOX 919 WINTER HAVEN FL 33		3. Date incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address	- ···	08/01/1978 4. FET Number	03/02/1995 Applied For
Suite, Apt. #	f, etc	Suite, Apt. #, etc.		59-1836533 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
3 Zip	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
4	25 9. Name and Address of Cur	29 rent Registered Agent	30		S []No
5#1.FB			81 Name	IV. Name and Address of New /	negistered Agent
2ELLER, 108 S L/	FRANK, JR. AKE FLORENCE DRIVE		82 Street Add	ress (P.O. Box Number is Not Acceptat	ble)
	HAVEN FL 33884		83		
			84 City		85 Zip Code
SIGNATURE .	Signature, typed or printed name of registeren a OFFICERS	gant and tile if applicants (NO AND DIRECTORS	TE Registered Aport signature require	ration submits this statement for the pured of directors. I hereby accept the appoint of directors are stated as a second three appoints of the constant of th	DATE
TITLE NAME STREET ADDRESS DITY-ST-ZIP	PD Zeller, Frank, Jr. 108 Lake Florence Dr Winter Haven Fl	☐ DELETE	1.1 THE 12 NAME 19 STREET ADDRESS 1.4 CITY-S1-7/P		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	SD ZELLER, SHIRLEY 108 LAKE FLORENCE DR WINTER HAVEN FL	DELETE S	2 1 TITLE 2 2 NAME 2 3 STREEL ADDRESS 2 4 OUY - STI - ZIE		Change Addition
HTEE NAME STREET ADDRESS OTY-ST-ZIP		☐ DELETE	3 1 TITLE 32 NAME 33 STHEET ACCIPESS 34 CITY: ST-7IP		Change Addition
TLE IAME TREET ADDRESS ITY-ST-ZIP		☐ DELETE	4 1 TIPLE 4 2 NAME 4 3 S19E£1 ADDRESS 4 4 CITY - ST - 7IP		Change Addition
TREET ADDRESS		DELETE	5 1 TITLE 52 NAME 53 STREET ADDRESS		Change Addition
ITLE AME THEET ADDRESS		DELETE	6 1 TITLE 62 NAME 63 STREET ADDRESS		Change Addition
oath; that I	an an officer or director of the cor	d with this filing is voluntarily furnis	54 CITY-ST-ZIP 6 1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST-ZIP shed and does not qualify feat report is true and actual the appropriate the property of th	or the exemption stated in Section 119. te and that my signature shall have the s report as required by Chapter 607, Fig	07(3)(k), Florida Statutes. I furthe

Jan 19, 96 8133244878

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OFFI