

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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 588624 (7)
1. Corporation Name
CARO-CANA CORPORATION

Principal Place of Business
3368 BARTLETT BLVD.
ORLANDO FL 32811

Mailing Address
3368 BARTLETT BLVD.
ORLANDO FL 32811



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/29/1978	
21. Suite, Apt #, etc.	22. City & State	23. Zip	24. Country	25. FEI Number 59-1906906	26. Applied For Not Applicable
27. Certificate of Status Desired ☐		28. Election Campaign Financing Trust Fund Contribution ☐		29. \$8.75 Additional Fee Required	
30. \$5.00 May Be Added to Fees		31. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No		32. No	

9. Name and Address of Current Registered Agent BARCO, CARROLL S. 6900 S. ORANGE BLOSSOM TRAIL SUITE 214 ORLANDO, FL FL		10. Name and Address of New Registered Agent 81. Name Michael A. U. O'Quinn 82. Street Address (P.O. Box Number is Not Acceptable) 28 West Central Blvd. 83. Fourth Floor 84. City Orlando 85. Zip Code FL 32801	
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11. Pursuant to the provisions of Sections 607.0102 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 *Michael A. U. O'Quinn*

1/9/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YORK, GERALD P. 544 W. 32ND ST. CHARLOTTE NC	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Secretary, OR York, Gerald P 544 W 32nd St Charlotte, NC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILLIAMSON, GARLAND 14 TILBURY CT. BRAMALEA, ONTARIO	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VP, Dir Williamson, Garland 14 Tilbury Ct Bramalea, ONTARIO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDP WILLIAMSON, LOCH N. 1037 LA QUINTA ORLANDO FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Director Williamson, Loch N. 1037 La Quinta Orlando, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	President Williamson, David 6466 Houghton Lane Orlando, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 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 registered agent or registered 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 with attachment with an address.

SIGNATURE: *David Williamson*

1-3-98

407-843-8141

CR2E034 (10/97)