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

FILED	
Apr 28 1997 8:00am	ì
Secretary of State	

1. Corporation	& LINDA GLUM, INC. e of Business BLYD	110 8TE	(O) siling Address HBISCUS BLVD 600 8T MELBOURNE FL 329	01-2751				la. Date of	Last R	
		··· _ · _ · -					11/06/1978	05/01/1		
	ace of Business Hibiscus Blvd	- L	Mailing Address 1103 Hibiscu	.a D1.			4. FEI Number 59-1862305			oplied For
21 1103 Suite, Apt		26	Suite, Apt. #, etc.	IS DI	/u	<u> </u>		\$.		Additional
	e 301	27	Suite 301				5. Certificate of Status Desired			equired
City & State		1	City & State				6. Election Campaign Financing	\$	5.00	May Be
23		28				·	Trust Fund Contribution			to Fees
Zip	Country	ļ,	Zip	Cour	ntry		8. This corporation has liability for inter			. 199.032,
24	25 9. Name and Address of Current	29 Books		30		<u> </u>	Florida Statutes Ye 10. Name and Address of New Regist	s No		
0118		negis	resen when		81	Name	IV. Name and Address of New Negral	oleo Mai	1	
	M, EUGENE W. I HIBISCUS BLVD			<u> </u> .						
	BOURNE FL 32904			- 1	82	Street Add	dress (P.O. Box Number is Not Acceptable)			1
447	DOOTHE 1 E GEST1				83					
1				l l	84				1 7:-	0-1-
			•	[84	City		FL 85	Zip '	Code
SIGNATURE	egisteriod agent, or both, in the State on familiar with, and accept the obligation of the state	and tile	if applicable (NOTE				poration submits this statement for the purp ation's board of directors. I hereby accept the ned when reinstaling) ADDITIONS/CHANGES TO OFFICER:	DATE		
12.	P	DINCC	DELETE	1.1 111	ıF		ADDITIONS OF INVIDEN		Change	RS IN 12
NAME STHEET ACCURESS CITY - ST - ZOP	GLUM, EUGENE W 1103 HIBISCUS BLVD, #400 WEST MELBOURNE FL			1.2 NA	ME REET		103 Hibiscus Blvd, #301	•	•	
HILE	V		DELETE	2.1 TIT		1-21			Change	Addition
NAME	GLUM, LINDA J.			2.2 NA				••-	·	
STREET ADDRESS	1103 HIBISCUS BLVD #400			23 519	REET.	ADDRESS 11	103 Hibiscus Blvd, #301			
C(1Y - 51 - Z)P	West Melbourne FL			2. 4 C)		1				j
THE			DELETE	3.1 TIT	ιE				Chan g e	Addition
NAME				3.2 NA	ME		*			1
STREET ADDRESS				3 3 STF	PEET	address	Section 1		٠	ļ
CITY - ST - ZIP			Therese	3.4. CI		T-ZIP			0	
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NAMÉ				4. 2 NA	1		•			J
STREET ADDRESS						ADDRESS				
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STREET ADDRESS						ADDRESS				
GITY-ST-ZIP				5.4 CIT						-
THE			☐ DELETE	6.1 TIT	-+	. 28			Change	Addition
NAME				6.2 NA				-	-	}
STREET ADDRESS						ADDRESS :				
CHY+S1+20F				6.4 CIT	y-s	T-ZIP				

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 adcurate 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.

HUMEN WIND OF PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

4-21-97 Date

407-725-4/00 Daytime Phone •

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