FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # 60218	1 (0)									
LAY, IN	NC.										
Principal Place of Business Mailing Address								I iidi dib if d i		U/Bi{	
23310 DEER Brooksvill	RUN ROAD E FL 34801-4546	P. O. BOX 1175 LAKE CITY FL 32056 US									
		U V				 Date Incorporate 06/19/197 			of Last R 5/01/19		
2. Principal Pla	ice of Business	2a. Mailing Address				4. FLI Number	<u> </u>		-,-,-	Applied For	
21 26				59-12953			376	76 Not Applicable			
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.				I b. Cennicale of Status Desired I I 7 7 7				Additional Required	
City & State		City & State			1	6. Flection Campaign Financing Trust Fund Contribution Trust Fund Contribution St.00 May Added to Fe					
Zip	Country 25	Zip	⊢ , ′	Country 8. This corporation has liability				for intangible tax under s 199.032,			
24	9. Name and Address of Curren	29 t Registered Agent	30			0. Name and Add			Agent		
			81	Name		77					
BOGGS, E. JACKSON			82	Street	Address (P.O. Box Number is Not Acceptable)						
501 EAS SUITE 1	ST KENNEDY BLVD. 700		63								
	FL 33602		84	City					B5 Zip Code		
			L _					FL			
11. Pursuant to or registere familiar with	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	and 607.1508, Florida Statutes da. Such change was authorize on 607.0505, Florida Statutes.	s, the above- d by the corp	named co ioration's	orporation board of	submits this stater directors. Thereby:	nent for the pur accept the appo	pose of cha pintment as	inging its r registered	egistered office Lagent. Lam	
SIGNATURE.	Signature, typed or printed name of registeren agont:	and tille if applicable (NOTI	E Registered Ages	1 signature r	res pures 1 ye ^s ne r	i renatal ngl		DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHA	NGES TO OFFI				
TillE	PST	☐ DELETE		1. 1 TITLE] Change	Addition	
NAME	LAY, GLORIA C.		1.2 NAME								
STREET ADDRESS	23310 DEER RUN ROAD BROOKSVILLE FL		1 3 STREET		Ì						
CITY-ST-ZIP TITLE	DROOKSVILLE FL	DELÉTE	1.4 C/TY-S 2 1 T/TLE	oj - ZIP'				· · · · · · · · · · · · · · · · · · ·	7 Change	Addition	
NAME	LAY, GLORIA C.		2.2 NAME								
STREET ADDRESS	18050 VANDERBILT DR		23 STREET	ADDRESS	233	10 DEER	Kun T	KOAD			
CITY-ST-ZIP	BROOKSVILLE FL		2 4 CHY-S	51 - 71P						į	
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i			4.3 STREET 4.4 CITY - S							į	
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NAME			6.2 NAME							į	
STREET ADDRESS			6 3 STREET	ADDRESS							
CITY-ST-ZIP			6 4 Cily - 9		<u> </u>		و مار پردو	alana at rein			
14. I do hereby	certify that the information supplied v	vim triis filing is voluntarily furnis	med and dec	s not qua	auty tor the	e exemption stated	in Section 119.	uz(3)(K), Flo	nga Statut	es. Liturtner	

roo nevery certify that the information supplied with this mining is voluntarily turnished and docs not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. Norther 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 enipowered 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.

IGNATURE:

| SIGNATURE AND TYPED OR PRINTED IN MEDIT STORING OFFICER OR DIRECTOR

SIGNATURE: _