Feb 27, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

1999			DIVISION OF CORPORATIONS						02-27-	1999 90012 0	45 ***150.0	JU
DOCUM 1. Corporation	MENT #		396									
OUNDET	112/12/1/1	•••							( 1 <b>00</b> 011 <b>0 0</b> 11 <b>0</b> 1 11 <b>0 1</b> 1 1 <b>0</b> 11			
Principal Place				Mailing Address								
2479 ALOMA A\ P.O: BOX 1748	VE		P O BOX 1748 <del>P.O. BOX 1748</del>									
WINTER PARK	FL <del>32790 -</del>		WINTER PARK FL 32790					DO NOT WRITE IN THIS SPACE				
US				US					ate Incorporated or C 1/03/1979	ualifed		
2. Principal Pl	lace of Business			2a. Mailing Address					Number	-	Apr	lied For
21			26				5	<del>3-17482<u>53</u></del>			Applicable	
Suite, Apt. :	#, etc.		2	Suite, Apt. #, etc.				5. C	ertifcate of Status De	sired []	<b>\$8.75</b> A Fee Red	
City & State	е			City & State					6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			
Zip		Country		Zip	C	ountry	'		is corporation owes		ntangible	
<sup>24</sup> 327	192 25		- 2	29	30			_	ersonal Property Tax			□No
		d Address c	f Current Re	gistered Agent		81		10. N	ame and Address o	f New Registerer	d Agent	
GAR	DNER RORER	rt N				81	Name					
Gardner, Robert N. 2 <del>487-Aloma Ave</del>						82	Street	Address (P.O	Box Number is Not	Acceptable)		
WINTER PARK 32792						83	24	19 7	LIMA 110	<u> </u>	·	
						L					85 Zip C	
						84	City			FI	L 85 Zip C	oue
office or re	tenne harateina	or both in t	he State of Fl	d 607.1508, Florida S lorida. Such change w	as authonz	ed by	the corpo	corporation s oration's boar	ubmits this statement of directors. I hereb	for the purpose or by accept the app	of changing its of changing it	registered jistered
•	m familiar with, a	and accept ti	ne obligations	of, Section 607.0505	o, Florida St	atutes						
SIGNATURE	Signature, typed or pr	anted name of reg	jistered agent and	title if applicable.	(NOTE: Registe	red Age	nt signature r	equired when reins		DATE		
12.		OFFIC	ERS AND D		1:			AD	DITIONS/CHANGES	TO OFFICERS A	ND DIRECTO	RS IN 12 Addition
TITLE	PTD			☐ OELET		TITLE					r Change	☐ Addition
NAME	GARDNER, F					NAME		2479	ALOMA	AUE,		
STREET ADDRESS	<del>2487 Aloma av</del> e Winter Park Fl						T ADDRESS	27 19	ALUTIM	HOC 1	32792	
CITY-ST-ZIP	VSD VSD	IN FL		□ DELET		CITY-S	1 · ZIP				Change	Addition
TITLE NAME	GARDNER, J	INSERH I				NAME						
STREET ADDRESS	2487-ALOM						TADDRESS	2479	ALOMA	AUE.		
CITY-ST-ZIP	WINTER PARK FL					2.4 CITY-ST-ZIP					32	792
TITLE				☐ DELET	Έ 3.1	TITLE					Change	☐ Addition
NAME					3.2	NAME						ļ
STREET ADDRESS					3.3	STREE	TADDRESS					
CITY-ST-ZIP						CITY-S	ST-ZIP				☐ Change	Addition
TITLE				☐ DELET	•	TITLE					Change	
NAME						2 NAME						Î
STREET ADDRESS						CITY-S	T ADDRESS					
CITY-ST-ZIP TITLE				☐ DELET		TITLE	11-21			ocre-	☐ Change	Addition
NAME						NAME			•			
STREET ADDRESS					5.3	STREE	T ADDRESS					
CITY-ST-ZIP					5.4	CITY-S	T-ZIP				L-171	
TIΠLE				☐ DELET	- 1	TITLE					☐ Change	☐ Addition
NAME						NAME	_:	Į.				
STREET ADDRESS	1				6.3	STREE	T ADDRESS					

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 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 charged, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 



4076791748