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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCU 1. Corporation	MENT # 63788	9 (7)				
1	L. CORPORATION	` '				
Principal Plac	e of Business	A. The state of th		····		
rinciparriac	e of business	Mailing Address			r inning firing billit iffillt iffillt.	ranna sans asant asant 616tt 616tt 616tt 616tt 1861
	C/O LAURA C JOHNSON C/O LAURA C JOHNSO					
	& HIGHWAY 50 SARDEN FL 34787	1081 9TH & HIGHM WINTER GARDEN F		İ		
		WHITEN OWNDER P	C 34707		3. Date Incorporated or Qualified	3a. Date of Last Report
2 Dissipate	N(D)				09/28/1979	04/14/1995
2. Paricipal F	Place of Business	2a Mailing Address			4. FET Number	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.			59-1933601	Not Applicable
22		27 Suite, Apr. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & Stat	te	City & State			6. Election Campaign Financing	Fee Required
23 ,		28			Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability fo	
24 '	25	29	30			es No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New	Registered Agent
			81  1	Vame		
	SON, LAURA C		82 8	Street Address	s (P.O. Box Number is Not Accepta	able)
1081 9TH & HWY 50						
	er garden, fl		83			
34787			84 (	Dity		85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502 red agent, or both, in the State of Florid	and 607 1609. Florida State	#20 #ba aba a			FL
or registe	red agent, or both, in the State of Florid ith, and accept the obligations of, Section	a. Such change was author	ized by the corpora	tion's board o	on submits this statement for the pi of directors. I hereby accept the ap	urpose of changing its registered office pointment as registered agent. I am
	in, and accept the obligations of, Section	on 607.0505, Florida Statute	98.			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (N	OTE: Registerent Agent sig	nature required wh	ben reinstat nori	DATE
12.	OFFICERS AND		and 13.)			FICERS AND DIRECTORS #E====
TITLE	[ V	☐ DELETE	1 1 TITLE	D.		Change - T Admitture
NAME	REES, JOHN N.		1.2 NAME	Pi	ckels, Teresa = 5 Glenview Dr	1. These two were
STREET ADDRESS	P.O. BOX 1161		1.3 STREET ADD	DRESS 66	5 Glenview Dr	left off!
CITY-ST-ZIP	WINTER GARDEN FL		1.4 CITY - ST - ZI	P W	inter Garden, Fl	
TITLE	V PIOUSIA ADUNAS	☐ DELETE	2 1 TITLE	1 1	<del>-</del>	Change Addition
NAME	PICKELS, JOHN T.		2 2 NAME	30	shason, trea 1	•
STREET ADDRESS	685 GLENVIEW DR. WINTER GARDEN FL		2 3 STREET ADD	ORESS 108	phason, Fred T 319th Hwy 50 nter Garden, Fl	
CITY-ST-ZIP TITLE	VINIER GARDEN FL	DELETE	2.4 City-St-Zi	P Wif	nier Garden, Fl	
NAME	GOWLAND, JAN E.		3. 1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	454 23RD ST. S.E.		3.2 NAME 3.3. STREET ADD	onree		
CITY-ST-ZIP	VERO BEACH FL					İ
TITLE	STD	DELETE	3.4 CHY-ST-ZI 4.1 THLE			☐ Change ☐ Addition
NAME	JOHNSON, LAURA CLARK		4.2 NAME			□ outube □ vooitoit
STREET ADDRESS	1081 9TH & HWY 50		4.3 STREET ADD	RESS		
CITY-ST-ZIP	WINTER GARDEN, FL 00000		4.4 CITY - ST - ZII			
TITLE	D	☐ DELETE	5. 1 TITLE			Change Addition
NAME	REES, LINDA J.		5.2 NAME			
STREET ADDRESS	195 E. TILDEN ST.		53 STREET ADD	RESS		
CITY-ST-ZIP	WINTER GARDEN FL		5.4 CITY - ST - ZIF	<u> </u>		
TITLE	D	☐ DELETE	6. 1 TITLE		<b>- 4000017!</b> -03/21/96010	Change Addition
NAME	GOWLAND, DEBORAH J.		6.2 NAME		~U3/Z1/36~~U1)	nen013
STREET ADDRESS	454 23RD ST SE		6.3 STREET ADDI	RESS	***200.00	
CITY-ST-ZIP	VERO BCH. FL		64 CITY - ST - 719	, I		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address. Laura C. Johnson, Laura C. Johnson 1-19-96 407-656-3355 AN BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: