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**

DOCUMENT # 662391

(2)

JOHN WINNER ENTERPRISES, INC.

Principal Place of Business

11204 LAKE WATHERINE CIRCLE

Mailing Address

11201 LAKE KATHERINE CIRCLE

FILED May 01 1997 8:00am Secretary of State



CLERMONT FL	34711	CLERMONT FL 34711-5007					
00		•			3. Date Incorporated or Qualified 05/06/1980	3a. Date of L	•
2. Principal P	Place of Business 114 CRESCENT LAKE #, etc	2a. Mailing Address		1 4	4. FEI Number		Applied For
21 /07	14 CRESCENTLAKE	(C) 10714 (A	Pescent	LAKE C	59-2011498		Not Applicable
Suite, Apt.	#, etc	27			6. Certificate of Status Desired	1 7	75 Additional se Required
City & State	MONT, FLA.	CLISA OF N	FLORIDA		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
710 24 34 7	25 USA 29 347// 30 Country			1	B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent	
1120	INER, JOHN 01 LAKE KATHERINE CIRCLE RMONT FL 34711		81 82		ress (P.O. Box Number is Not Acceptat	sie)	
			64	City		FL 85	Zip Code
office or r agent. La SIGNATURE. 1	registered agent, on both, in the State am far liar with, and accept the obligation of the state	of Florida. Such change was a ations of, Section 607,0595, Flo	authorized b brida Statute VBC	y the corpora s. SSELE	poration submits this statement for the pation's board of directors. I hereby acception to the part of	of the appointment of the property of the prop	nt as registered
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	TORS IN 12
IIILE	PTD	DELETE	1.1 TITLE	F	Acceptable Program	Cha	inge Addition
NAME	WINNER, JOHN		1.2 NAME	- 4	VINNER JOHN	- Marie	
STREET ADDRESS	11201 LAKE KATHERINE CIRC	LE	1.3 STREE		714 ERESCENT LAK		4.00
City+ST-7IP	CLERMONT FL		1.4 CITY-	ST-ZIP	CLERMONT FLORID		
IIILF	SD	☐ D€LETE	2.1 TITLE	S		∑ Cha	ange Addition
NAME	WINNER, SUE		2.2 NAME		WILL SIZE	👝	
STREET ADDRESS	11201 LAKE KATHERINE CIRC	LE	2.3 STREE		0714 CAESGRAT GA	KF COUR	
CITY-ST-74°	CLERMONT FL		2. 4 CITY+	ST-ZIP C	LERMONT FLORI	00 34	F. I B
TIFLE	J	☐ DELETE	31 TITLE	,		j t L Cha	ange Addition
NAME			32 NAME	1			
STREET ADDRESS				T ADDRESS			
CITY - S1 - ZIP		DELETE	3.4. CITY-	ST-ZIP		☐ Chi	ange Addition
THE	1	ויין הדרנוך	4.1 TITLE			L. CA	authe Mindingu
NAME			4. 2 NAME				
STREET ADDRESS]			T ADDRESS			
City-St-Z#		DELETE.	4.4 CITY -	S1-ZIP		☐ Chi	ange Addition
TITLE	<u> </u>	L) DECEIE	5.1 TITLE				ange [] Accumon
NAME STORES ADDIOLOG	1		52 NAME	1			•
STREET ADDRESS				T ADDRESS			
CITY-S1-ZIP		DELETE	5.4 CITY- 6.1 TiTLE	51-ZIP		□ Ch	ange Addition
TITLE		LJ VILEIT	•	ł		C/A	migo [] Modificit
NAME BYDELL AND DESCRIP	1		6.2 NAME	1			
STREET ADDRESS	J			T ADDRESS			
City - St - ZiP			6.4 CITY-	S1-ZIP			

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 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.

SIGNATURE: