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

PROFIT CORPORATION ANNUAL REPORT **1997**



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 693408

(7)

PHOENIX SERVICES, INC.

SIGNATURE:

Principal Place of Business Mailing Address										
5300 S FLA AVE G3 5300 S FLA AVE G3 LAKELAND FL 33813-4916 LAKELAND FL 33813						*				
						3. Date Incorporated or Qualified 07/07/1981		Date of Last 01/1996	Report	
2. Principal Place of Rusiness 2a. Mailing Address						4. FEI Number			Applied For	
26						59-2098984		1	Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	le .	City & State				6. Election Campaign Financing			O May Be	
23 Zin	Country	28	T		······································	Trust Fund Contribution			d to Fees	
Zip			├ -	Country		This corporation has flability for intangible tax under s. 199.032, Florida Statutes				
24	9. Name and Address of Cur	rent Registered Agent	30	г	 	Florida Statutes 10. Name and Address of New Re-				
DECI	D, CHARLES W.	- The second second		81	Name	TO, MERIO BITE MEDIOS OF HOW HE	31810100	Agoin		
	D, CHARLES W. LOCH PLACE									
			82	Street Addre	ess (P.O. Box Number is Not Acceptab	·le)				
LAN	ELAND FL			83						
				84	City		FL	85 Zip	p Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508, Florida Statu	ites, the a	bove	L e-named corpo	oration submits this statement for the p	Urnose o	= of changing	its registered	
Office or i	registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such charing was	authoriza	al boo	, the cornorati	on's board of directors. I hereby accep	the ap	pointment a	is registered	
	an results with the accept the or	rigations of Section our tooo, F	iorioa stai	uige	s .					
SIGNATURE	Signature: typod or printed name of registered	agent and title if applicable (NO	TE Registere	d Age	ent signature require	d when reinstaling)	DATE			
12.	OFFICERS.	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		D DIRECTO	ORS IN 12	
TITLE	PSD	DELETE	1.1 T(TLE				Change	Addition	
NAME	REED, CHARLES W		1.2 N	AME						
STREET ADDRESS	5340 LOCH PLACE		1.3 \$1	reet	ADDRESS					
CITY - ST - ZIP	LAKELAND FL		1.4 CI	TY-S	T-ZIP					
TITLE			2.1 TITLE				Change	Addition		
NAME	BRADLEY, A.S.		2.2 N	AME					_	
STREET ADDRESS				reet	ADORESS					
City-St-ZiP	ORLANDO FL 32819				ST- ZIP					
TITLE		DELETE	3.1 TI		71 11			Change	Addition	
NAME			3.2 N	AME			1.7			
STREET ADDRESS			3.3 \$1	REET	ADDRESS	·				
CITY - ST - ZIP			3.4 0	ITY - S	ST-ZIP				•	
TITLE		DELETE	4.1 71					Change	Addition	
NAME			4.2 N	AME					_	
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP	:		4.4 CI	TY-S	T-21P					
TITLE		DELETE	5.1 TI		· · · · · · · · · · · · · · · · · · ·			Change	Addition	
NAME			5.2 N	AME				•		
STREET ADDRESS					ADORESS			•		
CITY - ST - ZIP					T-2IP					
TITLE		DELETE	6.1 71		:. <u>="</u>			Change	Addition	
NAME			6.2 N							
STREET ADDRESS					ADDRESS					
CITY - ST-7IP					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 accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director withe disposable or the receiver or trusto; empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, charged, or on an atlachment with an address.

1171 DCHAALES W. Reed 1-31-97 (941)646 bal3