FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # 768958 CH OF POSITIVE LIVING, IN	` '				
Principal Place of Business Mailing Address						IEN BYEN IBEN
7327 CENTERWOOD AVE. 7327 CENTERWOOD AVE SPRING HILL FL 34606 SPRING HILL FL 34606					Date Incorporated or Qualified 06/15/1983	
						plied For
9 Dringing D	and of Business	2a. Mailing Address				ot Applicable
2. Principal Pi	pcipal Place of Business 2a. Malling Address 26				5. Certificate of Status Desired See Re	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00	
22		27			Trust Fund Contribution Added to	
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
23 Zin	Country	28 7in	Counto		☐ Yes ☐ No	
Zip			Country	,	8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	9, Name and Address of Curren		30		10. Name and Address of New Registered Agent	
· · · · · · · · · · · · · · · · · · ·			81	Name		
STEELY.	, renee rev.		82	Street A	Address (P.O. Box Number is Not Acceptable)	
7327 CENTERWOOD AVE.			L.		Todioda (F.O. Dox Hallings IS Hot Floodplane)	
SPRING	HILL FL 34606		83			
			84	City	85 Zip	Code
Sel Diversions	to the provisions of Pastions 617 0500	2 and C17 1500 Florida Statu	then the char	s semad s	FL 60 2.19	o registered
SIGNATURE _	m familiar with, and accept the obligation of th	nt and title if applicable. (NO			corporation submits this statement for the purpose of changing it oration's board of directors. I hereby accept the appointment as required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
TITLE	PD OFFICERS AND	DELETE	1.1 TITLE	· · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	Addition
NAME	STEELY, RENEE				_ siangs	
STREET ADDRESS	7327 CENTERWOOD AVE.		1.2 NAME 1.3 STREET	ADDRESS		
CITY-ST-ZIP	SPRING HILL FL 34806		1.4 CITY - 5	ST-ZIP		
TITLE	VPD				☐ Change	Addition
NAME			2.2 NAME	}		
STREET ADDRESS	207 W. OSBORN AVE.		2.3 STREET	ADDRESS		
CITY-ST-ZIP	TAMPA FL 33603			ST-ZIP		Addition
TITLE	D NIZIN DAVMOND	DELETE 3.1		j	☐ Change	Addition
NAME CTOCKY ADODECC	DUZIN, RAYMOND 8256 FOREST OAKS BLVD.	3.2 3.7		ADDRESS		
STREET ADORESS	SPRING HILLS FL 34606			ST-ZIP		
CITY-ST-ZIP TITLE	ALTHUM THEFA I P ALMAN	DELETE 4.1		U1-£II	☐ Change	Addition
NAME		4.21				
STREET ADDRESS		4.3 \$		ADDRESS		
CITY-ST-ZIP	4.4		4.4 CITY - 5	SY-ZIP		
TITLE	DELETE 5.1		5.1 TITLE	Ţ	☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - 8	ST-ZIP	Ta:	1,220%
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME	(4000500		
STREET ADDRESS			6.3 STREET	ADDRESS		

14. Thereby 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 dijector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

FILED

Jan 15 1998 8:00am

Secretary of State