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 # 838975

(1)

Apr 28 1997 8:00am
Secretary of State

CONSOL	IDATED MINERALS, INC.		,			THE STATE OF THE S			
Principal Place 1616 S. 14TH S P.O. BOX 4903	STREET CO	Mailing Address 1616 S. 14TH STREET P.O. BOX 490300							
LEESBURG FL	34749-7300	LEESBURG FL 34749-0300 US		é		3. Date Incorporated or Qualified 08/17/1977		te of Last Re 1/1996	port
2 Principal P	lace of Business	2a. Mailing Address	<u>.</u>			4. FEI Number	1 00/0		plied For
· · · · · · · · · · · · · · · · · · ·	iage of Enamess	26				85-0137912			t Applicable
Suite, Apt	#, elc.	Suite, Apt. #, etc.						\$8.75 A	
22		27				5. Certificate of Status Desired		Fee Re	quired
City & State	е	City & State				6. Election Campaign Financing	-	\$5.00	
23		28			 	Trust Fund Contribution		Added to	
Zip ₁	Country	Zip	Country			8. This corporation has liability for i			199.032,
24	25 9. Name and Address of Curren		30]			Florida Statutes 10. Name and Address of New Re	Yes		
	GG, F. BROWNE	t riegisteres Agent	81	Name		10. 110.00			
	SOUTH 14TH STREET								
	SBURG FL 34748		82	Street /	Addre	ss (P.O. Box Number is Not Acceptab	le)		
LEE	Spund FE 54740		83					****	
			B4	City			FL	85 Zip C	Code
office or e agent. La SIGNATURE	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations, byte or protect name of registered age.					oration submits this statement for the points board of directors. I hereby acception to the property of when reinstating)	ot the appo	intment as	registered
12.	OFFICERS AN		13.	, k alginatoro	10.2000	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	S IN 12
11T.E	CD	☐ DELETE	1.1 TITLE				,	Change	Addition
NAME	GREGG, F. BROWNE		1.2 NAME						
STREET ADDRESS	1616 S. 14TH STREET		1.3 STREET	ADORESS					
CHY-ST-ZIP	LEESBURG FL		1.4 CITY - S	T-ZIP					
TOLE	ST	DELETE	2.1 TITLE		5			Change	Addition
NAME	DARNELL, W. REID		2.2 NAME			•			
STREET ADDRESS	1616 S. 14TH STREET		2.3 STREET	ADDRESS					
CITY - ST - ZIP	LEESBURG FL		2. 4 CITY -	ST-ZIP	ļ <u>.</u>			TT 01	T Address
THILE	P PROMETIL LEGIE A	☐ DELETE	3.1 TITLE					Change	L. Addition
NAME	BROMWELL, LESUE, G		3.2 NAME						
STREET ADDRESS	1616 S 14TH ST LEESBURG FL		3.3 STREET						
City - St - 7IP	V LEESBURG FL	T DELETE	3.4. CITY-:	ST-ZIP	ļ		······································	Change	Addition
TITLE	SIMPSON, RANDOLPH S III	☐ DELETE	4.1 TITLE					Undings	L. POUROR
NAMÉ	1816 S 14TH STREET		4. 2 NAME						
STHEET ADDRESS	LEESBURG FL		4.3 STREET						
CITY - ST - 7iP TITLE	V	☐ DELETE	4.4 CITY - S 5.1 TITLE	ot - 40°	 			Change	Addition
NAME	FINGER, BILL H	F 2554.1	5.2 NAME						
STREET ADDRESS	1616 SO 14TH STREET		5.3 STREET	ADDRESS					
City-St-ZiP	LEESBURG FL		5.4 CITY - S						
TIFLE		DELETE	6.1 T∤TL€		7		** ** ** ** ** ** ** ** ** ** ** ** **	☐ Change	Addition
NAME			6.2 NAME		50	ones gary L			
STREET ADDRESS			6.3 STREET	ADDRESS	16	16 5 14TH STREE	T		
CHY-S1-ZIP			6.4 CITY - S		اسا	ones, gary L 116 5' 14th Stree Eesburg, FL			

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 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:

MONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/97 352 787 0608

CR2E034