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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 29 1997 8:00am

Secretary of State

813-530-3481

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 844908

(4)

ROLLAR MANAGEMENT INC

SIGNATURE:

1102211	THE HATCH CHILD					
Principal Place of Business		Mailing Address				
16100 49TH ST NO CLEARWATER FL 34622-3215		18100 49TH ST NO CLEARWATER FL 34622-3215				
					3. Date Incorporated or Qualified 01/08/1980	3a. Date of Last Report 02/16/1996
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			06-0612682	Not Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta 23	le	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z-ip	}		Country		8. This corporation has liability for Ir	nlapgible tax under s. 199.032,
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	Jistered Agent
	LLAR, RICHARD 26 MAGNOLIA TRACE		81	Name		10.0
CLEARWATER, FL			82	Street Addre	ess (P.O. Box Number is Not Acceptable	e)
TAF	RPON SPRINGS FL 34689		83		, , , , , , , , , , , , , , , , , , , ,	
			84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE.	Stignature, typed or printed nan-e of registered agent	and title if applicable. (NOT	E Registered Age	rt signature require	ed when reinstating)	DATE
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	☐ DELÉTE	11 TITLE			Change Addition
NAME	ROLLAR, GEORGE		1.2 NAME			-
STREET ADDRESS	16100 49TH ST NO		1.3 STREET	ADDRESS		
CITY-ST-ZIF	CLEARWATER FL		1.4 CITY - ST - ZIP			
THILE	STD	☐ DELETE 2				Change Addition
NAME	ROLLAR, DOLORES		2.2 NAME			
STREET ADDRESS	16100 49TH ST NO		2.3 STREET ADDRESS			
CITY - ST - ZIP	CLEARWATER FL		2. 4 CHTY - ST - ZIP			
TITLE	V DOLLAR DARKENE	☐ DELETE	3.1 TITLE			Change
NAME Officers appeared	ROLLAR, DARLENE		3.2 NAME			
STREET ADORESS	16100 49TH STREET, NORTH		3.3 STREET	1		
CITY - ST- ZIP TITLE	CLEARWATER FL V	DELETE	3.4. CITY - S	T-ZIP		Chan-
NAME		T percut	4.1 TIFLE			Change L Addition
STREET ADDRESS	BERCHTOLD, KATHLEEN 133 W. MAIN STREET		4.2 NAME	*DOGEGG		
CITY-ST-7IP	CLINTON CT		4.3 STREET			
TILLE	OBM ON O	DELETE	4.4 CHTY-ST 5.1 TITLE	1-4P		Change Addition
NAME			5.2 NAME			Car Country La Volution
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY - S1 - ZIP			5.4 CITY - ST	l i		
TITLE		DELETE	6.1 TITLE	£4F		Change Addition
NAME			6.2 NAME			ויטווטוו בייין איייין איייין
STREET ADDRESS			6.3 STREET	ADORESS		
CHTY - ST - 7IP			6.4 CITY-ST			

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 op an attachment with an address.

DARLENE ROLLAR. VICE PRES