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Apr 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 851817 (7)

1. Corporation Name  
CENTRAL STATES ENTERPRISES, INC.



Principal Place of Business Mailing Address  
300 INTERNATIONAL PARKWAY  
SUITE 150  
HEATHROW FL 32746  
300 INTERNATIONAL PARKWAY  
SUITE 150  
HEATHROW FL 32746-5028

3. Date Incorporated or Qualified 02/10/1982 3a. Date of Last Report 04/10/1996  
4. FEI Number 35-1061305 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 25 Country 28 Zip 30 Country  
24

9. Name and Address of Current Registered Agent

ROBERT PEGAN  
119 RED SKY COURT  
LAKE MARY FL 32748

10. Name and Address of New Registered Agent

81 Name Robert Nawrot  
82 Street Address (P.O. Box Number is Not Acceptable) 300 International Parkway  
83 Suite 150  
84 City Heathrow FL 85 Zip Code 32746

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 Robert Nawrot 4-18-97  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE PD SHURA, RICHARD C. DELETE  
NAME SHURA, RICHARD C.  
STREET ADDRESS 1810 TURNBERRY LANE  
CITY-ST-ZIP FORT WAYNE IN  
TITLE VD PEGAN, ROBERT DELETE  
NAME PEGAN, ROBERT  
STREET ADDRESS 119 RED SKY COURT  
CITY-ST-ZIP LAKE MARY FL  
TITLE STD GODFREY, ROBERT C. DELETE  
NAME GODFREY, ROBERT C.  
STREET ADDRESS 223 PROMENADE CIRCLE  
CITY-ST-ZIP HEATHROW FL  
TITLE DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE Assistant Treasurer Change Addition  
1.2 NAME Nawrot, Robert  
1.3 STREET ADDRESS 2732 Donaldson Drive  
1.4 CITY-ST-ZIP Orlando, Florida 32812  
2.1 TITLE PD Change Addition  
2.2 NAME Shura, Richard C.  
2.3 STREET ADDRESS 300 International Parkway Suite 150  
2.4 CITY-ST-ZIP Heathrow, FL 32746  
3.1 TITLE Change Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE Change Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE Change Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE Change Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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 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: Robert C. Godfrey 4/18/97 (407) 333-3503  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)