


FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION

ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F26056 (4)

1. Corporation Name

PETERSON ENTERPRISES OF ORLANDO, INC.

Principal Place of Business

2700 S. ORANGE AVE #220

P.O. BOX 60907

ORLANDO, FL 32806

Mailing Address

2700 S. ORANGE AVE #220

P.O. BOX 60907

ORLANDO, FL 32806

2. Principal Place of Business

21 1648 SPRING RIDGE CR

Suite, Apt. #, etc.

22

City & State

23 WINTER GARDEN, FL

Zip

24 34787

Country

25 ORANGE

26. Mailing Address

26 ABU OCEAN BLVD

Suite, Apt. #, etc.

27

City & State

28 ATLANTIC BEACH FL

Zip

29 32233

Country

30 DUVAL

9. Name and Address of Current Registered Agent

SIMMONS, ARTHUR W.

2700 S. ORANGE AVE #220

ORLANDO FL 32806

81 Name

82 Street Address

83

84 City

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Ernest L. Russell Jr.

Signature, typed or printed name of registered agent and for # applicable

Ernest L. Russell Jr.

(NOTE: Registered Agent Signature required)

12. OFFICERS AND DIRECTORS

13.

TITLE	DP	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	DP
NAME	SIMMONS, ARTHUR W.		1.2 NAME	ER
STREET ADDRESS	2700 S. ORANGE AVE #220		1.3 STREET ADDRESS	46
CITY-ST-ZIP	ORLANDO, FL 00000		1.4 CITY-ST-ZIP	AT
TITLE	DS	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME	ANDERSON, ANN		2.2 NAME	
STREET ADDRESS	2700 S. ORANGE AVE #220		2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 00000		2.4 CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME	RUSSELL, ERNEST L JR		3.2 NAME	
STREET ADDRESS	2700 S. ORANGE AVE #220		3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 00000		3.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/19/1981		
4. FEI Number 59-2076062	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
10. Name and Address of New Registered Agent		
WENEST L. RUSSELL JR (P.O. Box Number is Not Acceptable) 0 OCEAN BLVD ATLANTIC BEACH, <div style="text-align: center;">↓</div> <div style="display: flex; justify-content: space-between;"> FL 85 Zip Code 32233 </div>		

11. Pursuant to the provisions of Sections 607.0509 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: Ernest L. Russell Jr.
Signature, typed or printed name of testator and date if applicable

was authorized by the corporation's board of directors, Florida Statutes.

Ernest L. Russell Jr.

(NOTE: Registered Agent signature required when registering.)

13 Apr 98

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIMMONS, ARTHUR W.		1.2 NAME	ERNEST L. RUSSELL JR	
STREET ADDRESS	2700 S. ORANGE AVE #220		1.3 STREET ADDRESS	460 OCEAN BLVD	
CITY-ST-ZIP	ORLANDO, FL 00000		1.4 CITY-ST-ZIP	ATLANTIC BEACH, FL 32233	
TITLE	DS	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, ANN		2.2 NAME		
STREET ADDRESS	2700 S. ORANGE AVE #220		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 00000		2.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSSELL, ERNEST L JR		3.2 NAME		
STREET ADDRESS	2700 S. ORANGE AVE #220		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 00000		3.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I 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: _____

12 Nov 98

CR2E034 (10/97)