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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90029 023 ***158.75

DOCOMENT	ŦŦ	F7	1	()1	17
. Corporation Name			•	•	• •

EDIENDLY VILLAGE OF RREVARD INC

Principal Place	a of Rusiness	Mailing Address					
1095 W. MORS		1095 W. MORSE BLVD.			İ		
WINTER PARK US		WINTER PARK FL 32789 US			DO NOT WRITE IN TH	IIS SPACE	
ψS		00			Date Incorporated or Qualifed 03/16/1982		
a District	to a d Business	2a. Mailing Address			4. FEI Number		pplied For
2. Principal P	face of Business	2a. Walling Address			59-2227270	 	ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75	Additional
22	,, 5.5.	27			5. Certifcate of Status Desired	Fee R	equired
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year		
24	25		30		Personal Property Tax.	X Yes	□No
5-1	9. Name and Address of Currer				10. Name and Address of New Registere	ed Agent	
			81	Name			
	GS, TERRY W. (DR.)		82	Street Add	ress (P.O. Box Number is Not Acceptable)	:	
	W. MORSE BLVD.						
WIN	TER PARK FL 32789		83	3			
			84	City		85 Zip	Code
SIGNATURE	m familiar with, and accept the obligation familiar with a complete familiar with						
12.		nt and title if applicable. (NOTE: F	Registered Age	ent signature require	ad when reinstating) DATE		
	CITIOLICIA	nt and title if applicable. (NOTE: FND DIRECTORS	Registered Age	ent signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
TITLE	STD			ant signature require	2,	AND DIRECT	
TITLE NAME		ND DIRECTORS	13.	ent signature require	2,		
	STD	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ent signature require	2,		
NAME	STD SCHULTZ, KENNETH H	D DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME	ET ADDRESS	2,	☐ Change	Addition
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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 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 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 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 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 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 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 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 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 supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on this annual report or supplied with the information indicated on the information indicated on this annual report or supplied with the information indicated on the

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

Kenneth Schultz

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

1/29/99

407-645-3211

☐ Change

Addition