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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 11 1997 8:00am

Secretary of State

904-364-8016

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F71489

(1)

STEVENS, E., INC.

SIGNATURE:

RT 2 BOX 224 LIVE OAK FL 32		RT 2. BOX 224 LIVE OAK FL 32060-9802								
US			US			3. Date Incorporated or Qualified 3a. Date of Last Report 03/18/1982 04/29/1996				
2. Principal Pla		2a. Mailing Address	- ,			FEI Number				Applied For
	County Road 136 26 8325 County			Road 136		59-2296609			<u> </u>	Not Applicable
Suite, Apt. #	t, etc. 📝	Suite, Apt #, etc.		`	5.	Certificate of Status Desir	ed			Additional
22 27										Required
City & State	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees				
Zip ⊟∷i	Country	Zip	Countr	У	8.	8. This corporation has liability for intangible tax under s. 199.032,				
24	25   9. Name and Address of Curre	29	30 ant			Florida Statutes  Yes  No  10. Name and Address of New Registered Agent				
		int Registered Agent	81	Name		Maine and Address of N	ew neg	12(0)00 /	Agent	
	ens, Elizabeth			110110						
8325 CR 136			82	Street /	Address (P	ddress (P.O. Box Number is Not Acceptable)				
ORLANDO, FL			83	<del> </del>				<del>.</del>		
LIVE	OAK FL 32060		"	1						
			84					FL		Code
11. Pursuant to	the provisions of Sections 607.05 gistered agent, or both, in the State	02 and 607.1508, Florida Statut	es, the above	e-named	d corporatio	n submits this statement for	or the pu	rpose of	changing	its registered
agent Eam	i familiar with, and accept the oblig	gations of, Section 607.0505, Fk	orida Statute	ss.	iporalions t	oard or directors. I hereby	accepi	ma app	Uniterity it a	s registered
SIGNATURE										
	a boresteper or printed barrie of registering			ent signature	o required when			DATE		
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO	OFFICE			
1	PVS	☐ DELETE	1.1 TITLE						Change Change	Add:tion
	STEVENS, EUZABETH		1.2 NAME		000	County Road 13	2/-			
	RT 2 BOX 224 NA			"		County rada is	<i>&gt;⊌</i>			
	LIVE OAK FL			1.4 CITY - ST - ZIP					TT Channe	T Addition
HILE	VEHD OIN T	☐ DELETE	2.1 TITLE						∐ Change	Addition
NAME	KEMP, GUY T		2.2 NAME							
1	1228 S CONWAY RD		2.3 STREET ADDRESS							
011Y-\$1-70°	ORLANDO FL	DELETE	2. 4 C(TY - ST - Z)P 3.1 TITLE		<del></del>				Change	Addition
		E DELETE	3.2 NAME						FTT CHANGE	L Addition
NAME Operation representation										
STREET ADORESS		•		T ADDRESS						
CHY-S1-Z0F UHLE		DELETE	3.4. CITY	SI-ZIP	<del> </del>				☐ Change	Addition
NAM:			4. 2 NAM	:						
STREET ADDRESS				t address						
			ı							
CHY-ST-Zie Title		☐ DELETE	4.4 CITY-	91-71F	<del></del>				Change	Addition
NAME			5.2 NAME							
STREET ADDRESS				T ADDRESS						
City-St-ZiF			1							
1 114	DELETE			5.4 CITY - ST - ZIP 61 TITLE		······································			Change	Addition
NAME			6 2 NAME							
STREET ADDRESS				T ADDRESS						
City St Zir			6.4 CITY-							
14. I do hereb	y certify that the information supplie	ed with this filing does not qual-	fy for the ex	emption s	stated in Se	ction 119.07(3)(i), Florida	Statutes.	. I further	certify tha	at the
Lam an off	i indicated on this annual report or licer or director of the corporation o Block 12 or Block 13 it changed, i	or the receiver or trustee empoy	vered to exe	urate and cute this r	d that my si report as re	gnature shall have the san equired by Chapter 607, Fl	ne legal lorida Sta	effect as atutes; a	if made und that my	inder oath; that r name