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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F78594

(1)

A N D PRINTING, INC.

APOPKA FL 32703

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Zip

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

Principal Place of Business Mailing Address
278 SEMORAN COMMERCE PLACE 278 SEMORAN COMM

Country

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278 SEMORAN COMMERCE PLACE APOPKA FL 32703

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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FILED Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has pald the current year Intangible

Applied For

\$8.75 Additional

Fee Regulred

\$5.00 May Be

Added to Fees

☐ Yes

401-889-3100

Not Applicable

3. Date Incorporated or Qualified

5. Certificate of Status Desired .

Election Campaign Financing Trust Fund Contribution

Personal Property Tax due June 30.

05/03/1982

59-2196472

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
MURASKO, JOSEPH M. 505 U.S. HIGHWAY 17-92, P.O. DRAWER 746 FERN PARK FL 32730			81	81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)			
, _			83			
			84		Dity 85 Zip Code	
			64	٦	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						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN						
12.	OFFICERS AND DIRECTORS  PD DE				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME	MORRISON, RICHARD ALAN	1	1 TITLE		Grange Acconduct	
STREET ADDRESS	ATTA OF OUR OFFICE DR		2 NAME		norce .	
CITY-ST-ZIP	ADODKA EL COCCO		1.3 STREET ADDRESS			
TITLE			1 TITLE	N = 211	Change Addition	
NAME	MORRISON, DONNIE G		22 NAME			
STREET ADDRESS	ATA OLOUPOPOET PD		3 STREET	' אחח	ORFSS	
CITY-ST-ZIP	ADODYA EL 00000		4 CITY-S		1	
TITLE	DE		1 TITLE		Change Addition	
NAME		3.3	2 NAME			
STREET ADDRESS		3.3	3 STREET	ADD	RESS	
CITY-ST-ZIP		3.4	4. CITY - S	ST-ZI	IP	
TITLE	DE	LETE 4,	1 TITLE		☐ Change ☐ Addition	
NAME		4.	2 NAME			
STREET ADDRESS		4.3	3 STREET	ADD	RESS	
CITY-ST-ZIP			4 СПY-S	T - Z)8		
TITLE	DE	LETE 5.1	TITLE		Change L Addition	
NAME		5.2	2 NAME			
STREET ADDRESS		5.3	STREET.	ADD	RESS	
CITY - ST - ZIP			4 CATY - ST	1-ZI		
TITLE	Li DE		1 TITLE		Change L Addition	
NAME			2 NAME			
STREET ADDRESS			STREET.			
CITY-ST-ZIP	earth, that the information appoind with this filling does not		CITY-ST			
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						

Country

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