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

CORPORATION **ANNUAL REPORT** 

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Co.po.c.o.	D H. ROVIG & COMPANY	• •	•						
Principal Place of Business Mailing Address						-{		I BYRLÉ YTEL YÖĞİ	
2426 SWEETV APOPKA FL 3	NATER COUNTRY CLUB PLACE 32712	2426 SWEETWATER CO APOPKA FL 32712				DO MOT WOLTE IN THE COACE			
<b>US</b> US			į			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
						09/29/1995			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
1		26				59-3332507		Not Applicab	
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional	
2 City P. Stote		City & State						Required	
City & State	9	28				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country	7 <sub>ID</sub>	Cou	ntry		This corporation owes or has paid the current of the current			
4	25	29	30	-		Personal Property Tax due June 30.	Yes	□ No	
	9. Name and Address of Curre	_ ·				10. Name and Address of New Registered	Agent		
RO	VIG. RONALD H			81	Name				
2426 SWEETWATER COUNTRY CLUB PLACE				82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
APOPKA FL 32703			į						
				83					
				64	City	FL	85 Z	ip Code	
SIGNATURE	Signature: Typed or profed tunio of regerored a	pent and terr at any 4s able (NO	II Augistered	1 Agei	nt signature require	d when reinstating) DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PCST	☐ DELETE	1.1 711	ſιE			Chang	e 🔲 Additio	
VAME (	ROVIG, RONALD H		1.2 NA	ME					
STREET ADDRESS	2426 SWEETWATER COUNT	IRY CLUB PLACE	1.3 STALET ADDRESS						
CITY-ST-ZIP	APOPKA FL 32703			TY - 51	T-ZIP		Chang	ie Additio	
ITLE NAME	ARNOLD, MATHEW T.		- 6	2 1 TITLE 22 NAME			- Orang	,~	
STREET ADDRESS	2426 SWEETWATER COUNTRY CLUB PLACE			2 3 STREET ADDRESS					
CITY-ST-ZIP	APOPKA FL	, , , , , ,	2.40						
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CITY-ST-ZIP	······································	*	3.4 CI		T- ZIP		<del></del>	<del></del>	
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NAME			4 2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CO 5.1 TO		- ZIP		Chang	e Additio	
NAME		_ can	5.1 III				5-400	,	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.5 G)						
TITLE		DELETE	6 1 TIT	$\overline{}$			Chang	je 🔲 Addilio	

14. Thereby certify that the information supplied with this Iding 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 suppliemental arrival 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

6 3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

2/9/98

**FILED** 

Feb 13 1998 8:00am

Secretary of State