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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000002683 (8)

FILED Feb 16 1998 8:00am Secretary of State

PREMU	JS OF ORLANDO, INC.					
Principal Plac	ce of Business	Mailing Address			(4001100 IIIO IBRID BRIAL BOIRL DORN DRAIL DEN	LL BATLO LIBIO GLIGI FOLDE SILI LOGI
1264 MORGAN CHASE DRIVE 1264 MORGAN CHA			RIVE			
MARIETTA GA 30066 MARIETTA GA 30066				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	THO OF ACE
					05/29/1996	
2. Principal Place of Business 2a. Mailing Addr					4. FEI Number	Applied For
21		26		58-2067773	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 2 2 2 City & State		City & Ctoto	27 City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Z(ρ Country		8. This corporation owes or has paid the		
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registe	red Agent
RA	IDER, GARY A		81	Name		
16403 MYERS COURT			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
CL	ERMONT FL 34711		-			
			83			•
			84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid				e-named cor the corpora		
SIGNATURE	ant tarring war, and decept the oblig	anona or, occasor ocr. 5500, 1 ic	onda Olaidici	J.		
SIGNATURE	Signature, typicd or printed name of registered ag-	nt and life if applicable (NOT)	Hagistered Ag	nt signature requ	uired when reinstating) DA	7t S
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	•		1.1 TOLE	i		Change Addition
NAME OTREET ADDRESS	EVANS, PHILLIP C 1264 MORGAN CHASE DRIVI	:	1.2 NAME	1000500		[8
STREET ADDRESS	MARIETTA GA	5	1.3 STREET	ł		ļū ļc
CITY-ST-ZIP TITLE	S DELETE		1.4 CITY - S 2.1 TITLE	51 - ZIP		Change Addition
NAME	EVANS, ANNE K		2.2 NAME			
STREET ADDRESS	1264 MORGAN CHASE DRIVI	Ē	2.3 STREET	ADORESS		
CITY-ST-ZIP	MARIETTA GA	-	2. 4 CITY-			
TITLE	PCD DELETE		3.1 TITLE			Change Addition
NAME	RADER, GARY A		32 NAME			
STREET ADDRESS	16403 MYERS COURT		3 3 STREET	ADDRESS		
CITY-ST-ZIP	CLERMONT FL		3.4. CITY-5	ST - ZIP		
TITLE	T	L_] DELFTE	4.1 TITLE			Change Addition
NAME	RADER, PAMELA J		4. 2 NAME			
STREET ADDRESS	16403 MYERS COURT		4.3 STREFT			
CITY-ST-ZIP	CLERMONT FL	Dirt	4.4 CITY - S 5.1 TITLE	1-21P		Change Addition
TITLE	ÁS KAUL, JOHN R					Change Addition
NAME STREET ANNOESS	2990 LOWER BETHANY ROA	n	5.2 NAME 5.3 STREET	ADDRESS		
STREET ADDRESS	BALL GROUND GA	U				
CITY-ST-ZIP TITLE	GALL GROOTE GR	DELETE	6.1 TITLE	1-217		Change Addition
NAME			6.2 NAME			_ •
STREET ADDRESS			63 STREET	ADDRESS		
CITY-ST-ZIP			64 CITY - S	1		
44 1 5 5 5 5 5 5 5 5	and the state of the second second second second	the this file and as a set a set of the	a the automa	(1) - 1 - 1 - 1 - 1 - 1 - 1	Carrier 110 07(0)() Elecido Crotitas I festos	ar a public thirt this information

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.