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 # F97000002500 (3)

PRIDE AMERICA, INC.

FILED May 05 1998 8:00am Secretary of State

ITIOL	MAIPINOU HAO!					
Principal Plan	e of Business	Mailing Address			<u> </u> 1	
ļ '_		~				
5403 ASHTON CT SARASOTA FL 34233		5403 ASHTON CT SARASOTA FL 34233			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					05/12/1997	
- :	Place of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			65-0730070 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
City & Stat	<u> </u>	City & State			Fee Required	
23	•	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zio	Country		Cou	nirv	Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current				10. Name and Address of New Registered Agent	
LO	NGWELL, ALAN G			81 Name		
5403 ASHTON CT			į	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SARASOTA FL 34233				JUBBL ACI	oress (r. o., box number is not acceptable)	
				83		
				84 City	■■ 85 Zip Code	
L						
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 of the purpose of the purpose of changing its registered of the purpose of the purp						
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					
12,	Signature, typed or printed name of registered agon			Agent signature requ	ured when reinstaling) DATE	
TITLE	OFFICERS AND	DELETE	13.	1.5	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	B RANCH, DAVID C	Д М.	1.2 NA			
STREET ADDRESS	5403 ASHTON CT			REET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34233		4	IY-ST-ZIP		
TITLE	V	DELETE	2.1 TO		Change Addition	
NAME	KERN, MARTY		2.2 NA		C Charles C Paragoni	
STREET ADDRESS	5403 ASHTON CT			REET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34233			TY-ST-ZIP		
TITLE	Sec /TREAS	DELETE	3.1 117		☐ Change ☐ Addition	
NAME	BRANCH, DANIEL		3.2 NA	ME	= · •	
STREET ADDRESS	BRANCH DANIEL 5403 ASHTON CT		3 3 ST	REET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 3	4233	3.4. Ci	TY-ST-ZIP		
TITLE		☐ DELETE	4.1 TIT	LE	☐ Change ☐ Addition	
NAME			4. 2 N/	ME		
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP		
TITLE		☐ DELETE	5.1 TIT	LE	☐ Change ☐ Addition	
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 ST	reet address		
CITY-ST-ZIP		T 1 22: -2-		Y-ST-ZIP		
TITLE		DELETE	6.1 TIT		Change Addition	
NAME			6.2 NA			
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y-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 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or of an attachment with an address.

SIGNATURE. HOMINE MAIN