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

PROFIT CORPORATION ANNUAL REPORT

1998

LEESBURG FL 34788

Suite, Apt. #, etc.

SIGNATURE:

City & State

23

Zip

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

TUNE TOWN LEESBURG, INC.

Country

Principal Place of Business Mailing Address 10401-208 HWY 441 S.

26

27

28

10401-208 HWY 441 S. LEESBURG FL 34788

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

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

Applied For

\$8.75 Additional

Fee Required

Added to Fees

326-2143

Not Applicable

3. Date Incorporated or Qualified 10/13/1982

59-2228306

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

24	25	29		30			Personal Property Tax du			No
Name and Address of Current Registered Agent							10. Name and Address of N	ew Registered	Agent	
SCHWARTZ, DAVID						Name				
10401-208 HWY 441 S					2 5	Street Address	s (P.O. Box Number is Not Ac	centable)		
LEESBURG FL 32788					۱ (otreet Addres	S (1:0. DOX (4diliber is 140) AC	septable		
					3					
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					4 (City		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 DIRE		13.			ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	RS IN 12
TITLE	P	P DELETE 1.1		1.1 TITLE	-				Change	Addition
NAME	SCHWART2	HWARTZ, DAVID L. 12		1.2 NAME	1.2 NAME					[
STREET ADDRESS	05348 ROY	05348 ROYAL OAK DR. 1.3		1.3 STREE	et ad	DDRESS				
CITY - ST-ZIP	FRUITLAND	FRUITLAND PARK FL 1.4		1.4 CITY-	1.4 CITY-ST-ZIP					
TITLE	DELETE			2.1 TITLE					Change	Addition
NAME			2,2 NAME	2.2 NAME						
STREET ADDRESS			2.3 STREE	2.3 STREET ADDRESS						
City-St-ZiP	}		2		-\$1-	ZIP				1
TITLE			DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME	3.2 NAME					İ	
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CITY - ST - ZIP				3.4. CITY-	- ST-	ZIP				[
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CITY-ST-ZIP				4.4 CITY -	-\$T-Z	ZIP				
TITLE			DELETE	5.1 TITLE					☐ Change	Addition
NAME				5.2 NAME	E					j
STREET ADDRESS				5.3 STREE	et ad	DDRESS				
CITY - ST - ZIP				5.4 CITY-	-ST-2	ZIP				
TITLE	LI DELETE 6.º			6.1 TITLE					L Change	☐ Addition
NAME				6.2 NAME	E					Į
STREET ADDRESS				6.3 STREE	ET AD	DDRESS				1
CITY - ST-ZIP				6,4,CITY-	-ST-Z	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 cath; 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										

Country