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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G24605

(9)

**BOWLEGS CREEK GROVES INC.** 

FILED Jan 22 1997 8:00am Secretary of State



| 25 Suite Apt # etc Suite Apt # etc Suite Apt # etc 5. Certificate of Status Desired Fee Receive Agent Fee Receive Agent Fee Receive Agent 7. Country 8. This corporation has liability for intangible tax under see Florida Statutes 7. Yes No.  9. Name and Address of Current Registered Agent 7. Name 7.  | pplied For<br>ot Applicat<br>Additional<br>equired<br>May Be<br>to Fees<br>a 199.032,<br>Code                                |
|---|--|
| US  3. Date incorporated or Qualified   Sa. Date of Last R   Q2/18/1983   Q2/09/1986   Q2/09/198  | pplied For<br>ot Applicat<br>Additional<br>equired<br>May Be<br>to Fees<br>a 199.032,<br>Code<br>ts registered<br>registered |
| 3. Date incorporated or Qualified C2/18/1883  | pplied For<br>ot Applicat<br>Additional<br>equired<br>May Be<br>to Fees<br>a 199.032,<br>Code<br>ts registered<br>registered |
| Suite Apt. # etc   Suite, Apt. #, etc   Suite, Apt.  | ot Applicat Additional equired May Be to Fees 199.032,  Code ts registered registered  |
| Suite Apt # etc   Suite Apt # etc   Suite, Apt #, etc   27   Suite, Apt #, etc   28   Suite, Apt #, etc   28   Suite, Apt #, etc   29   Suite, Apt #, etc   20   Suite, Apt  | Additional equired  May Be to Fees 199.032,  Code ts registered registered registered  |
| City & State  City & State  City & State  City & State  Country  Zip  Country  Added i  Zip  Country  S. This corporation has liability for intangible tax under s Florida Statutes  Fiorida Statutes  Fiorida Statutes  Nome and Address of New Registered Agent  DURRANCE JR, W RALPH  S001 \$ FLORIDA AVE  LAKELAND FL 33803  Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R4 City  FL  Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R5 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R6 City  FL  Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R6 City  FL  Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable)  LAKELAND FL 33803  R7 Street Address (P.O. Box Number is Not Acceptable Agent adverted Agent ad | May Be to Fees 199.032,  Code ts registered registered registered  |
| City & State  City & State  City & State  Zip  Country  Zip  Country  Zip  Country  Zip  Country  B. This corporation has liability for intangible tax under s Florida Statutes  Pes No  9. Name and Address of Current Registered Agent  DURRANCE JR, W RALPH  Soot S FLORIDA AVE  LAKELAND FL 33803  1. 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 it 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 agent 1 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes  Signature  Signature by Licito penied have or registered agent  | May Be to Fees . 199.032,  Code ts registered registered   |
| Zip Country Zip Country Size Country Size Country Size Country Size Size Size Size Size Size Size Size  | Code ts registered registered  |
| 9. Name and Address of Current Registered Agent  DURRANCE JR, W RALPH 5001 \$ FLORIDA AVE LAKELAND FL 33803  84 City  FL 85 Zip  10. Name and Address of New Registered Agent  Name  82 Street Address (P.O. Box Number is Not Acceptable)  83  | Code<br>ts registered<br>registered  |
| 9. Name and Address of Current Registered Agent  DURRANCE JR, W RALPH 5001 S FLORIDA AVE LAKELAND FL 33803  82 Street Address (P.O. Box Number is Not Acceptable)  83 84 City  FL 85 Zip  1. 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 it 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 agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  2. OFFICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  INC. DURRANCE, W RALPH, JR  12. NAME DURRANCE, W RALPH, JR  13. SIREET ADDRESS ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  14. City-St-Zip  Change  | ts registered<br>registered  |
| DURRANCE JR, W RALPH 5001 S FLORIDA AVE LAKELAND FL 33803  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83   Rate   Rat  | ts registered<br>registered  |
| Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83   Record of the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing it 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 agent 1 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes  86   Street Address (P.O. Box Number is Not Acceptable)  87   Street Address (P.O. Box Number is Not Acceptable)  88   City   | ts registered<br>registered  |
| LAKELAND FL 33803  84 City  FL  85 Zip  1. 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 it 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 agent. I am familiar with, and accept the obligations of, Section 607 0506, Florida Statutes.  IGNATURE  Signature typic to pented name of registered agent and life if approach.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  DS  OURRANCE, W RALPH, JR  12 NAME  10 DURRANCE, W RALPH, JR  5001 S. FLORIDA AVE  LAKELAND, FL 00000  14 CITY-SI-ZIP  TILE  DF DELETE  1 TITLE  Change   | ts registered<br>registered  |
| 1. 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 it 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 agent. Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  2. OFFICERS AND DIRECTORS  INC. DS   | ts registered<br>registered  |
| 1. 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 it 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 agent. Lam familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.  SIGNATURE    Signature typical or profed famous of registered agent signature required when reinstating)  DATE    2.  | ts registered<br>registered  |
| 1. 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 it 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 agent. Lam familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.  SIGNATURE    Signature typical or profed famous of registered agent signature required when reinstating)  DATE    2.  | ts registered<br>registered  |
| 1. 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 it 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature typic Lie pented name of registeratage i and life dispitable.   (NOTE Registered Agent signature required when renstating).   DATE  | RS IN 12   |
| DURRANCE, W RALPH, JR   | 1ibha  |
| STREET ADDRESS CITY-SI-ZIP LAKELAND, FL 00000  DELETE  1.3 STREET ADDRESS 1.4 CITY-SI-ZIP Change  | /\D0\\   |
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| AAME 6.2 NAME   |  |
| STREET ADDRESS 6.3 STREET ADDRESS   |  |
| CITY-SI-ZIP 6.4 CITY-SI-ZIP   |  |

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF

DAWN BEYNON

//3/97 (941) 185-984