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

PROFIT
CORPORATION
ANNUAL REPORT
1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G44276

(5)

Mailing Address

APPLE BLOSSOM ENTERPRISES, INC.

FILED
May 01 1997 8:00am
Secretary of State

SOUTHGATE PLAZA 3501 S. TAMIAMI TR. SARASOTA FL 34238 US		SOUTHGATE PLAZA 3501 S. TAMIAMI TR. SARASOTA FL 34239-8112 US		3. Date Incorporated or Qualified 06/17/1983	3a. Date of Lat	' 1	
9 Principal P	lace of Business	2a. Mailing Address			4, FEI Number	1 04/20/100	Applied For
21 2910 LAMPLIGHTER DR 28 2910 LAMPL			I RHTER	De	59-2309902		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	ASOTA FL	City & State 28 SARA SOTA	F	L	Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip 24 3423	1201		Country SAR	ASOTA		Yes 🔀 No	er s. 199.032,
<u> </u>	9, Name and Address of Current	Registered Agent			10. Name and Address of New Reg	lstered Agent	
	TNEY, WALTER K		81	Name			
2910 LAMPLIGHTER DR SARASOTA FL 34234				82 Street Address (P.O. Box Number is Not Acceptable)			
			83				
			84	City		FL	Zip Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligat	if Florida. Such change was au	ithorized by	named corporation	oration submits this statement for the p on's board of directors. I hereby accep	urpose of changir I the appointment	ng its registered i as registered
SIGNATURE	,						
	Signature, typed or printed name of registered agont			signature require	ed when reinstating)	DATE	
12.	OFFICERS AND		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD WALTED P	DELETE				L Chan	ige 🔲 Addition
NAME ATTACK ADADSON	WHITNEY, WALTER K. 2010 LAMPLIGHTER DR		1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS	SARASOTA FL			1			
CITY-ST-ZIP TITLE	VTS DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			Chan	nge Addition
NAME	WHITNEY, VIRGINIA H.		2.2 NAME				
STREET ADDRESS	2910 LAMPLIGHTER DR		2.3 STREET ADORESS				
CITY-ST-ZIP	SARASOTA FL		2 4 City-St-ZiP				
TITLE	DELETE		3.1 TITLE			☐ Char	nge 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A	DDRESS			
CITY-ST-ZIP			3.4. C(1Y - \$1 - 2IP				
TITLE	☐ DELETE		4.1 T(TLE			☐ Char	nge 🔲 Addition
NAME			4. 2 NAME				
STREET ADDRESS	1		4.3 STREET A	ODRESS			
CITY-ST-ZIP			4.4 CITY - ST	- ZiP	· · · · · · · · · · · · · · · · · · ·		
TITLE	DELETE		5.1 TITLE			Char	nge Addition
name			5.2 NAME				
STREET ADDRESS			5 3 STREET A				
CITY-\$T-ZIP		DELETE	54 CHY-ST	- ZIP		Char	nge Addition
TITLE		טנונונ 🗀 אנונונ	6 1 TITLE			□ Clar	illo 🗀 Vaniani)
NAME OTRECT ADDRESS			6.2 NAME	DDDEEC			
STREET ADDRESS			63 STREET A				,
CITY-ST-ZIP	l		6 4 CITY - ST	- £11'	···		

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.

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