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FLORIDA DEPARTMENT OF STATE CORPORATION

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| ANNUAL REPORT 1997 | | Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | | Secretary of State | | |
|--|---|---|--|--|--|--|--|
| DOCUMENT # G 1. Corporation Name AMITY, INC. | à61969 | (3) | | | | | |
| Principal Place of Business Mailing Address % MiCHAEL J. BARBER, ESO. % MICHAEL J. B. 4698 WEST BRONSON HWY. 4699 WEST BRON KISSIMMEE FL 34746 KISSIMMEE FL 34 | | | Barber, Eso. Onson hwy. | | 3. Date Incorporated or Qualified 38. Date of Last Report | | |
| Programme California anno alem 1972 Anno antico de California de 1974 anno anticolor de California d | | | ····· | ************************************** | 09/30/1983 | 04/22/1996 | |
| 2. Principal Place of Business 21 | 26. Maili | ng Address | | | 4. FEI Number 59-000670 | | oplied For of Applicable |
| Suite, Apt. #, ctc. | Suite | o, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 | Additional |
| City & State | 27 City | & State | | | 6. Election Campaign Financing | Fee Re | |
| 23 | 28 | | | | Trust Fund Contribution | Added t | |
| Zip Cour 25 | ntry Zip | | Coun | try | This corporation has liability fo Florida Statutes | r intangible tax under s ☐ Yes ☐ No | 199.032 |
| | dress of Current Registered | Agent | 1301 | | 10. Name and Address of New R | | |
| LEE, HENRY 2403 SOUTH ATLANTIC | | | je | Name | | | |
| daytona beach fl | | | | 33 | | [85] Zip (| Code |
| | | | | | | FL | |
| onice or registered agent, Of the | accept the obligations of Sec | ich change was tion 607 0505. Fi | authorized | by the corpora | ation's board of directors. I hereby acc | ept the appointment as | registered |
| SIGNATURE | accept the obligations of Sec arre of registered agent and life Tappile OFFICERS AND DIRECTOR | cable. (NO | | | rporation submits this statement for the ation's board of directors. I hereby accurred when reinstating) ADDITIONS/CHANGES TO OFF | DATE | |
| SIGNATURE Produces a specific producers 12. THE DC | anne of registered agent and life. Lapplic | cable. (NO | TE Registered | par arulangia (nagA | uirad when reinstating) | DATE | |
| SIGNATURE Physicalture, typical or protect in the particular or protect i | are of regulared agent and tile Tappile OFFICERS AND DIRECTOR | sable. (NO | TE Registered . 13. 1.1 TITL | Ageni signature req E ME | uirad when reinstating) | DATE ICERS AND DIRECTOR | RS IN 12 |
| SIGNATURE Proceeding types for position in the particular and par | are of regulered agent and tile Tappel OFFICERS AND DIRECTOR | sable. (NO | 13. 1.1 TITL 1.2 NAM 1.3 STR | Agen) signature req E AE EET ADDRESS | uirad when reinstating) | DATE ICERS AND DIRECTOR | RS IN 12 |
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