## 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

**FILED** May 13 1998 8:00am Secretary of State

1	MENT # G7 ATTLE CO., INC.	9227 (6)		
Principal Plac	e of Business	Mailing Address		
1238 PLACID DRIVE LAKE PLACID FL 33852 US		P.O.BOX 2208 LAKE PLACID FL 33852 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
· · · · · · · · · · · · · · · · · · ·				01/18/1984
	lace of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt.	#. etc.	26 Suite, Apt. #, etc.	<del></del> -	59-2376231   Not Applicable   \$8.75 Additional
22	,	27		5. Certificate of Status Desired Fee Required
City & State	θ	City & State	····	Election Campaign Financing     Trust Fund Contribution     Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29 30		Personal Property Tax due June 30. Yes No
	g. Name and Address	of Current Registered Agent		10. Name and Address of New Registered Agent
	IGHT, JACK A.		81 Name	0
	8 PLACID DRIVE		82 Stree	t Address (P.O. Box Number is Not Acceptable)
LAH	KE PLACID FL 33852		83	
			83	
			84 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				
12.		registered agent and trile if applicable (NOTE: Re CERS AND DIRECTORS	13.	use required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	Change Addition
NAME	KNIGHT, JACK A.		1.2 NAME	
STREET ADDRESS	1238 PLACID DRIVE		1.3 STREET ADDRESS	;
CITY-ST-ZIP	LAKE PLACID FL		1.4 CITY-ST-ZIP	
TITLE	0	☐ DELETE	2.1 TITLE	Change Addition
NAME	KNIGHT, MARIA H.		2.2 NAME	
STREET ADDRESS	1238 PLACID DRIVE		2.3 STREET ADDRESS	•
CITY-ST-ZIP	LAKE PLACID FL	DELETE	2 4 CITY-ST-ZIP	Change Addition
TITLE		D DECEMBE	3.1 TITLE	
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-S1-ZIP			4.4 CITY-ST-ZIP	
TITLE	<del></del>	☐ DELETE	5.1 TITLE	Change Addition
NAME '			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-SI-ZIP		C Driver	5.4 City-St-ZIP	There I have
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	1
CITY-ST-ZIP	ertify that the information s	upplied with this filing does not qualify for th	64 CITY-ST-ZIP ne exemption sta	ted 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 of 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 an attachment with an address.

SIGNATURE:

4-30-98