FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Porporation Name

G79773

(9)

WATERBEDROOM LAND, INC.

WATER	IDEUROOM LAND, INC.	1							
 :						-{			
Principal Place	of Business	Mailing Address							
2434 FORSY		P O BOX 574378							
P.O. BOX 574 ORLANDO FI		P.O. BOX 574378 ORLANDO FL 32657-4	378				,		
US	. 92001	US	373			3. Date Incorporated or Qualified	3a. Date o		
						01/23/1984	L U4	/18/19	
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number		\rightarrow	Applied For
21		26	Suite, Apt. #, etc.			59-3012586			Not Applicable Additional
Suite, Apt. #, etc.		27	i i			5. Certificate of Status Desired			Required
City & State		City & State				6. Election Campaign Financing			0 May Be
23		28				Trust Fund Contribution			d to Fees
Zιp	Country	Zψ	Cou	intry		8. This corporation has liability for in	itang ble tax	under s	199.032,
24	25	29	30			Florida Statutes Yes			
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Ro	egistered A	gent	
				81	Name				
HERSEM, THOMAS G.			82 Street Add			ss (P.O. Box Number is Not Acceptabl	e)	,	·
	IAN ROCKS RD. C		83						
BELLEA	IR BLUFFS FL 34640			63					
				84	City		FL	85 Zi	p Code
44 Discount to	the are injure of Southern 607.066	22 and COZ 1609 Florida Statute	w the abo		anied compare	ition submits this statement for the purp		l L	registered office
or registere	ed agent, or both, in the State of Flo	rida. Such change was authonze	ed by the a	corpe	pration's bear	d of directors. Thereby accept the appo	intment as r	egisterec	d agent. Lam
familiar witt	n, and accept the obligations of, So-	ction 607 0505, Florida Statutes							
SIGNATURE _	Signature, typed or pretentian elof registered agr	of and the diacoleans and	IL Bryslew	i A _{spini} t	tsignalistic to pired	w/wip renotating-	DAT:		
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	DRS IN 12
TITLE	Р	DELETE 1		1 TITLE				Change	☐ Addition
NAMÉ	GIFFIN, BRAD		12N	AMŧ.					
STREET ADDRESS	2434 FORSYTH RD.	131			ADDRESS				
CITY-ST-ZIP	ORLANDO FL			CHY-S1-ZIF					
TITLE	VT	_		TIFLE			L	Change	☐ Addition
NAME	GIFFIN, DOUG	ORSYTH RD		2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	2434 FORSYTH RD								
CITY - ST - ZIP	ORLANDO FL			11Y - \$1	1 · ZIP	Change \ A			Addition
TITLE	VS CIECINI CHEDVI			3 1 TITLE 3 2 NAME				, onange	LJ Addition
NAME	GIFFIN, CHERYL 2434 FORSYTH RD		i i		ANDRESS				ļ
STREET ADDRESS	ORLANDO FL								
CITY-S1-ZIP TITLE	VIIIVIIV IL			4 CITY - ST - ZIP 1 TITLE) Change	Addition
NAME			42 N	IAME				-	
STREET ADDRESS			438	FREET	ADDRESS				
CITY-ST-ZIP				:::SI					
TITLE		DELETE	5 1	*********				Change	Add-tion
NAME		52		2 NAME		100001797731° -04/29/9601026014			
STREET ADDRESS			535	5 3 STREET ADDRESS		-04/29/96010	26U1	4	
CITY-ST-ZIP				CITY-ST-ZIP		***200.00			
TITLE		☐ DELETE	6.1	TTLF				Change	Addition
NAME			62 N	IAME				•	>V11
SPREET ADDRESS			635	STREET	ADDRESS			J	'Ϥ·ບ '
CITY - ST - ZIP				17Y-S					·
14. I do hereb	y certify that the information supplied the information indicated on this ar-	d with this filing is voluntarily furrious, techniques	nished and lual recort	idoes is tru	s not qualify fo ie and accura:	or the exemption stated in Section 119, to and that my signature shall have the	07(3)(k) Flor samo lega: e	da Statu Iffect as	ites. I further if made under

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 or changed, or on the attachment with an address.

SIGNATURE:

ED NAME OF SIGNING OFFICER OR DIRECTOR

1 56 407-677-598) CR2E034 (12/95)