Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90141 041 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G84823

 Corporation 	n Name						1					
ROYAL I	MAGE, INC.											
	**											
Principal Place	e of Rusiness	Mailing	Address				1				i dib ili i dd i	
% LLOYD N. WATROUS % LLOYD N. WATROUS							1	•				
137 N WABASH AV 137 N WABASH AV												
LAKELAND FL 33815 LAKELAND FL 33815								DO NOT WRITE IN THIS SPACE				
US	•	US						Date Incorporated or Qualifed 02/13/1984				
2. Principal P	lace of Business	2a. Ma	iling Address				4.	FEI Number	f I	Applie	ed For	
21	•	26					1_	59-2488820		Not A	pplicable	
Suite, Apt.	· ·		te, Apt. #, etc.				5	Certificate of Status Desired	\$8.7	-		
22	·	[27]	٠ ۽ ٠ ۽ ٠٠٠		_	<u></u>	<u> </u>			Requ		
City & Stat	· · · · · · · · · · · · · · · · · · ·	28 Cit	y & State				6.	Election Campaign Financing Trust Fund Contribution)0 Ma ed to F		
Zip	Country	Žip		Count	ry		8.	This corporation owes the current year In	ntangible		,	
24	25 29 30							Personal Property Tax. Yes No				
	9. Name and Address of Current	Registere	d Agent				10.	Name and Address of New Registered	l Agent			
WAT	ROUS, LLOYD N.			8	1	Name		•				
7206 RANCH ROAD					2	Street Addre	ess (P	O. Box Number is Not Acceptable)				
LAKELAND FL 33809					3						$\neg \neg$	
					4	016			los 7	ip Cod	-	
				1	4	City		· FI]	
11. Pursuant	to the provisions of Sections 607,0502	2 and 607.1	508, Florida Statut	es, the abo	ve	-named corpo	oration	n submits this statement for the purpose co pard of directors. I hereby accept the appo	of changing	its re	gistered tered	
office or r agent. I a	egistered agent, or both, in the State of the familiar with, and accept the obligat	ions of, Sec	tion 607.0505, Flo	rida Statute	γ ι 3S.	ine corporation	11 5 00	Mand of directors. I flereby accept the appl	on and the co	, regio	1	
SIGNATURE	· ·							/ -				
	Signature, typed or printed name of registered agent				jent	t signature required		einstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS	S IN 12	
12.	OFFICERS AN	DUIRECTO	DELETE	13.	_			ADDITIONS/CHANGES TO OTT TOERS	Chan		Addition	
TITLE	WATROUS, LLOYD N.		C OCCCIC	1.2 NAME						J.		
NAME	7206 RANCH ROAD					**************************************					Ì	
STREET ADDRESS	LAKELAND FL 33809					ADDRESS						
CITY-ST-ZIP TITLE					1.4 CITY-ST-ZIP				Chan	ge	Addition	
NAME	WATROUS, LLOYD N.		_ 522-14	2.2 NAM					_	•	_	
STREET ADDRESS	7206 RANCH ROAD					ADDRESS					1	
CITY-ST-ZIP	LAKELAND FL	-	L 44 J.	2.4 CITY				The second of the second				
TITLE					3.1 TITLE			, ,	Chan	ge	Addition	
NAME	WATROUS, BETTY J.			3.2 NAMI	E							
STREET ADDRESS	TOOK DANIOU DOAD			3,3 STRE	ET.	ADDRESS						
CITY-ST-ZIP	LAKELAND FL 33809			3,4. CITY	-ST	T-ZIP		_				
III/E	SVPD		☐ DELETE	4,1 TITLE					☐ Chan	ge	Addition	
NAME	WATROUS, LORI K.			4. 2 NAM	Œ						1	
STREET ADDRESS	7952 INDIAN HEIGHTS DR.	•		4.3 STRE	ET.	ADDRESS						
CITY-ST-ZIP	LAKELAND FL 33810			4.4 C/TY	ST	-ZIP						
TITLE			☐ DELETE	5.1 TITLE				•	☐ Chan	ge	Addition	
NAME				5.2 NAMI								
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP			•	54 CITY		-ZIP						
TITLE			☐ DELETE	6.1 TITLE					☐ Chan	ge	☐ Addition	
MANUT	I			62 NAMI	F							

14. I 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 op an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS