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



PROFIT CORPORATION ANNUAL REPORT 1997			FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS				May 05 1997 8:00am Secretary of State				n
	MENT # <b>G8</b> RCIAL CONVEYOR	5135 SERVICE, INC.	(3)				T T AND COLUMN ACCORDANCE OF COLUMN ACCORDANCE ACCORDAN	: 0101)	1010 B1011 B1011	ONON HOOD	
Discount floor	of D. alaysa	6 d o U	o Addraga			,				MM	
Principal Place 990 NANDINO I LEXINGTON KY US	BLVD	Mailing Address  990 NANDINO BLYD  \$ FREDERICK J. STINGEL  LEXINGTON KY 40511-1205									
		US					3. Date Incorporated or Qualified 02/16/1984	1	te of Last R	eport	1
2. Principal P	ace of Business	2a. M.	ailing Address				4. FEI Number	1 00/1	***************************************	plied For	1
21 115 V	ista Blvd.	26	115 Vist	a Blu	vd.		NOT APPLICABLE			t Applicable	]
Suite, Apt.	#, etc.	27 St	uite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State 23 ARden	. North CAroli	na so	ty & State Arden, N	orth	Caro	lina	Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	May Be	1
Zi 28704	Country		<sup>0</sup> 28704		USA		8. This corporation has liability for	intangible Yes [	tax under s		7
24	9. Name and Address			[30]			10. Name and Address of New Re		<del></del>		
PFA	FFENBERGER, W J				<b>B1</b> Na	ame					]
	US HWY ONE				82 St	reet Addre	ss (P.O. Box Number is Not Acceptal	ble)			7
	E 410	0400			83		<u></u>		<del></del>		-
NUH	ith Palm Beach FL 3	3400					······································				_}
!					84 Ci	ty		FL	<b>85</b> Zip	Code	
office or r	to the provisions of Section egistered agent, or both, in m familiar with, and accep	n the State of Florida.	Such change was	authorize	ed by the	med corpe corporati	pration submits this statement for the on's board of directors. I hereby acce	purpose o pt the app	r changing ii ointment as	s registered registered	
	Signature, typed or printed name of					nature require	d when reinstating)	DATE	OUDEOTOE		1,5
12.	PD	ICERS AND DIRECTO	DELETE	13.	TITLE		ADDITIONS/CHANGES TO OFFI	JENS AINL	Change	Addition	96
NAME	STINGEL FREDERICI	⟨ J.			NAME				,		z z
STREET ADDRESS	990 NANDINO BLVD			1.3	STREET ADDE	RESS 8	Cedar Chine				R2E034
CITY - ST - ZIP	LEXINGTON KY				CITY-ST-ZIP	AE	sheville, North Caro	lina 2			
TITLE	STD OTIMOEI JANET		[] DELETE		TITLE		a. 1 a		Change	Addition	10
NAME STREET ADORESS	STINGEL, JANET 990 NANDINO BLVD			- 1	name Street adde		Cedar Chine				
CITY-ST-ZIP	LEXINGTON KY				CITY-ST-ZII	I As	sheville, North Caro	lina 2	8803	•	1
TITLE	VP John Stingel		DELETE		TITLE				Change	Addition	7
NAME	14 Bent Oak			1	NAME					•	1
STREET ADDRESS	Asheville, N	orth Caroli	na 28803		STREET ADDI	1					
CITY-ST-ZIP			DELETE		CITY-ST-ZII TITLE	P			☐ Change	Addition	
NAME	VP Jeff Stingel				NAME	1				<i></i>	1
STREET ADDRESS	115 Vista Bl	vd.		4.3	STREET ADD	RESS					1
CHY-SI-7IP	Arden, North		8704		CITY - ST - ZIF	<u>`</u>			T16		_
TrTLE			L DELETE		TITLE	1			Change	Addition	
NAME STREET ADDRESS I				- 1	name Street addi	RESS					1
CITY-ST-ZIP				. E	CITY-ST-ZIF	į.					
TITLE			DELETE		TITLE				Change	Addition	7
NAME				6.2	NAME						-
STREET ADDRESS				1	STREET ADDI	1					
City-St-ZiP 14. Ldo herel	by certify that the informat	on sopplied with this	filing does not qua	lify for th	CITY-ST-ZIF e exempt	ion stated	in Section 119.07(3)(i), Florida Statut	es. I furthe	r certify that	the	4
informatio	on indicated on this annual	coort or supplement poration or the receive	tal annual report is er or trustee empo	true and wered to	accurate execute	and that this repor	my signature shall have the same leg as required by Chapter 607, Florida	al effect a Statutes; a	s if made un ind that my i	der oath; tha name	11

**FILED**