## 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

DOCUMENT # LINGS 17

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**FILED** Mar 25 1998 8:00am Secretary of State

1.		ISLES, II	" HO NCORPORA	TED		(9)									
Pri	ncipal Place	e <b>of B</b> usines:	s		Mailing Addre	ess						ii luui uiuii l	DIĞIN ÖYEN ƏNDIN DIĞ	ili Rifili iADI	
FLORIDIAN CLUB ROAD					P.O. BOX 248										
W	ELAKA FL 3	32193			Welaka Fl	32193					DO NOT WE	ITE IM TU	IC CDACE		
											3. Date Incorporated or Qualific		IS SPACE		7
											06/20/1984				
2.	2, Principal Place of Business				2a. Mailing Address					-	4. FEI Number	Ac	oplied For	1	
21	<u> </u>			2	26						59-2439652			ot Applicable	7
	Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75	Additional	7
22					27						5. Certificate of Status Desired		Fee Re	equired	╛
	City & State				City & State						6. Election Campaign Financing		\$5.00		1
23	7in Country			2	Zip Country					Trust Fund Contribution			to Fees	4	
_	Zip	-	Country	-	Zip		<del></del>	miry			8. This corporation owes or has	-		tangible ∃ No	
24			25 and Address	of Current Rec		nt .	30	1			Personal Property Tax due J  Name and Address of New			7 140	+
	MII		E, SANDRA		gio ciou rigo.	<del></del>		81	Name	<i></i>	. /			<del></del>	1
211 HIGHWAY 17-S							PR				ANK FEETSON				4
EAST PALATKA FL 32131-0699								82	Street	Apares	ss (P.O. Box Number is Not Accep	nabie)			
								83							1
								84	City					Ondo	┦
								04	City 5	AN	MATEO	F	L 85 35	187	
11.	Pursuant t	to the provisi	ons of Sections	607.0502 and	1 607.1508, Fl	orida Statu	tes, the a	bove	-namec	corpoi	ration submits this statement for the	e purpose	of changing it	s registered	1
	agent. Lar	m <b>jerniliar</b> wil	the cacapt	the obligations	of, Section 6	07.05 <b>0</b> 5, FI	orida Sta	u by tutes	THE COL	ροιαιιο	ins poard of directors, i hereby at	серше е	ippomment as	registered	1
SiG	NATURE A	['+A	Steam	ama								3	118/98		
		Orginature, typed	or profind name of re	gistered agent and		(ON)		d Age	nt signatur	e required	when reinstaling)	DATE			-16
12.		PD	OFFIC	CERS AND DIF		DELETE	13.	TI E		1	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR Change	RS IN 12 Addition	-  8
NAM	- 1		TER, W. J			OLLETE	1.2 N			ł			Orienge		13
	EET ADORESS		AN CLUB RO	AD					ADDRESS						8
		WELAKA		•				ince i . ITY-SI							ļ
TITL	'-ST-ZIP	STD				DELETE	2.1 Ti		1-215	+			Change	☐ Addition	18
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	-ST-ZIP	WELAKA	\ FL				2.40	aty-s	IT-ZIP						l
TITU		VD				DELETE	3.1 Ti						Change	Addition	1
NAM	IE		ier, patrici				3.2 N	AME							
STRE	EET ADDRESS		an Club Ro	AD			3.3 \$1	TREET	address						
	'-\$1-ZIP	WELAKA	FL		<u>-</u>		3.4. 0	ITY-S	T-ZIP_	<u> </u>					
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NAM	E						4. 2 N	AME							l
STRE	EET ADDRESS						4.3 S1	REET	ADDRESS						-
	-ST-ZIP	·						TY - \$1	r-ZIP	ļ				1 1 1 100	]
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	ET ADDRESS								ADDRESS						
	-ST-ZIP	_ <del></del> ,			<del></del>	DELETE		TY-SI	I - ZIP	<del> </del>			Change	Addition	┨
TITLE					ليا	OLLLIE.	6.1 TI			1			□ cusuft	C) MOMBIL	1
NAM	- 1						6.2 N/		ADDRESS						
	ET ADDRESS														1
	-ST-ZIP hereby c	ertify that the	information su	pplied with thi	s filing does n	ot qualify f		iiy-si empt		ed in Se	ection 119.07(3)(i), Florida Statute	s. I further	certify that the	Information	1

indicated on this annual report or supplies with this timing does not quality for the exemption stated in declared in declared on this annual report or suppliemental 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 on an attachment with an address.

F/56.11-04, GAA-117-7477