## 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

**FILED** 

Apr 28 1997 8:00am

Secretary of State

941-261-0166

DOCUMENT # H12894

(2)

ROBERT H. BOYD, INC.

NAME

STREET ADDRESS

CITY-ST-ZIP

Principal Place		Mailing Address			
7380 SAND LANE ROAD SUITE 504 ORLANDO FL 32819		7380 SAND LANE ROAD SUITE 504 ORLANDO FL 32819-5252		Date Incorporated or Qualified	
				07/18/1984	04/09/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	PR. Phillips Blud.,	26 7575 DR. 41	illips blody	59-2460027	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desire	sd S8.75 Additional
	390	27 390			Fee Required
City & State	NOO, FLORIDA	City & State		6. Election Campaign Finance	
Zip Zip	Country	28 ORLANDO.	Country	1rust Fund Contribution	Added to Fees
24 328	1. '	29 32819	30 U≤4	Florida Statutes	ty for intangible tax under s. 199.032, ☐ Yes ☑ No
24	9. Name and Address of Curren		30 100-40	10. Name and Address of Ne	
BOY	D, ROBERT H		81 Name		
WAAA GAANG LAVE BOAD				(D.O. D. M. 15 No. 1	
				Iress (P.O. Box Number is Not Acc シェ、Pかれげた Bし	
SUITE 504 ORLANDO FL 32819			83		
OIL	- 1400 TE 02018		Suit	e # 390	
			84 City	LANDO	FL 85 Zip Code 32819
11. Pursuant i	to the provisions of Sections 607.050.	2 and 607.1508, Florida Sta	tutes, the above-named cor	poration submits this statement for	the purpose of changing its registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change wa ations of Section 607 0505	as authorized by the corpora Florida Statules	tion's board of directors. I hereby	accept the appointment as registered
SIGNATURE	The state of the s	anono or, decitor dodoo,	Tightis visitores.		•
SIGNATURE	Signature, typed or printed name of registered age		vOTE Registered Agent signature requ		DATE.
12.	OFFICERS AND	··	13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	117ITLE		☐ Change ☐ Addition
NAME	BOYD, ROBERT H.		1.2 NAME		
STREET ADDRESS	780 WILLOW BROOK DR #702	2	1 3 STREE1 ADDRESS		
CITY-ST-ZIP	NAPLES FL		1 4 CH1Y - \$1 - ZIP		
TITLE		DELETE	21 THTLE		☐ Change ☐ Addition
NAME			2 2 NAMÉ		,
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHY-ST-ZIP		ĺ
TITLE		DELETÉ	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY - \$1 - 2(P		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 C(TY-ST-Z)P		
TITLE		DELETE	6 1 TITLE		Change Addition

6.2 NAME

14. 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 on an attachment with an address.

6.3 STREET ADDRESS