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

DOCUMENT # H60427

(2)

EXCALIBUR BUILDING CORP.

Principal Place of Business Mailing Address							LEMET MANAT MANT	I DIDII DIVI	\$1841 4881
5555 FRANCIS LAKELAND FL	5555 FRANCIS PIPKIN RI LAKELAND FL 33813-262								
						3. Date Incorporated or Qualified 06/05/1985	1	of Last R /1996	eport
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	··············	Ar	plied For
21		26				59-2837945		No	t Applicable
Suite, Apt		Suite, Apt #, etc.	27			5. Certificate of Status Desired Fee Required			
City & State 23	e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Zip · 24	Country 25	Zip 29	30 Cou	intry			Yes 🗌	No	. 199.032,
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	Istered Ag	ent	
CANTEDGE, ANTHONY C				81	Name				
5555 FRANCIS PIPKIN RD LAKELAND FL 33813				82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		***************************************
				83	***************************************				
				84	City		FL	85 Zip (Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida State of Florida Such change was ations of, Section 607.0505, F	utes, the at s authorized Florida Stat	bove d by lutes	named corp the corporati	oration submits this statement for the plon's board of directors. I hereby acception's		nanging it ntment as	s registered registered
SIGNATURE									
Freezins Communication of the	Signature, typed or printed name of registered age			d Ager	niuper erulangia tr	ed when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	CARTLIDGE, ANTHONY C.	ניין מנינכונ		1.1 TITLE 1.2 NAME			Ļ.	_ Change	Addition
NAME Store Laborros	5555 FRANCIS PIPKIN RD				+ Donntoo				
STREET ADDRESS	LAKELAND FL.	•			ADDRESS				
CHY-ST-ZIF TITLE	DANCOARD IL	DELETE	1.4 Ct	TY - ST	I - ZIP			Change	Addition
NAME		Detect	2.2 N/					7 CHRUĞE	L.J Muurion
STREET ADDRESS					ADDRESS				
CHY-ST ZIF TULF		☐ DELETE	2.4 C		1 - 249		-	Change	Addition
NAME			3.2 N/				-	" Ormingo	//do///di
STREET ADDRESS					ADDRESS				
CITY-SI-ZIF				ITY - S					
TITLE		DELETE	4.1 7)		1.40			Change	Addition
NAMé			4. 2 N				-		
STREET ADORESS					ADDRESS				
CITY-SI-ZIP				TY-ST					
THILE		DELETE	5.1 Ti		4.II		T	Change	Addition
NAMÉ			5.2 N				•	p=	
STREET ADDRESS					ADORESS				
CITY-ST-ZIP				TY-ST					
TITLE		DELETE	5.4 U		1- 411.			Change	Addition
NAMÉ			6.2 N/				L.	⊋ er~ngo	
					*DODECC				
STREET ADDRESS			6.3 \$	intt i i	ADDRESS				

14. I do 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

SIGNATURE:

appears in Block 12 or Block

FILED

Apr 08 1997 8:00am

Secretary of State