## 2-2/-97 B 2243 (FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 21 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(5)

LUCILLE	BALL HEAL ESTATE, INC								
Principal Place	of Business	Mailing Address			- I 1001011 01H0 E1H1 30H0) 01H0( 1H0K 510H	GIBH GIBH AIL	IST <b>ala</b> nt grant i	91811 IBBI	
% GEORGE A. BALL 2450 SOUTHEAST 7TH DRIVE POMPANO BEACH FL 33082		% George A. Ball 2450 Southeast 7th Drive Pompano Beach Fl. 33082-6411			ă.				
						3. Date Incorporated or Qualified 06/05/1985		e of Last Re <b>2/1996</b>	eport
2. Principal Pi	ace of Business	2a. Mailing Address			4, FEI Number				
21		26			59-2536277	Not Applicable			
Suite, Apt. #, etc 22		Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State			1 -	Election Campaign Financing Trust Fund Contribution		\$5.00 Added (	
Zφ	Country	Country Zip Co				8. This corporation has liability for i			. 199.032,
24	25 29 30		30			Florida Statutes Yes L No			
9. Name and Address of Current Registered Agent					Name	10. Name and Address of New Re	Jistered A	gent	
	L, GEORGE A.			61	INATING				
	) Southeast 7th Drive Ipano Beach FL 33062			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
				83					
				84	City		FL	85 Zip (	Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	.02 and 607.1508, Florida Statut e of Florida Such change was gations of, Section 607.0505, Fl	tes, the a authorize orida Sta	bove- ed by t	named corporati	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of o at the appo	changing it intment as	s registered registered
SIGNATION	Signature: typed or printed name of registered a			d Ageni	l signature require	ed when re-instating)	DATE		
12.		ND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFIC			
TITLE	_			1.1 TITLE			L	Change	L_ Addition
NAME	BALL, LUCILLE 2450 SE 7TH DR		1.2 NAME						
STREET ADDRESS		ANDANA BALLEI		1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	DP	DELETE	2.1 1	CITY - ST-	- ZIP			Change	Addition
NAME	BALL, GEORGE A.	C. Diceie		IAME				Onlango	
STREET ADDRESS	2450 SE 7TH DR		2.3 STREE		INDRESS				,
CITY-ST-ZIP	POMPANO BCH FL		2.4 CITY		1				
TITLE	DVP	☐ DELETE	3.1 T					Change	Addition
NAME	BALL, CHARLES D.		3.2 NAME						
STREET ADDRESS	2450 SE 7TH DR		3.3 \$	TREET A	ADDRESS				
CITY-ST-ZIP			3.4. (	CITY-ST	r- ZIP				
TITLE		☐ DELETE	4.1 7	ITLE			[	Change	Addition
NAME			4. 2	NAME					
STREET ADDRESS			4.3 8	STREET A	adoress				
CITY - ST - ZIP			4.4 CITY-ST-ZIP						
TITLE				5.1 TITLE				Change	Addition
NAME			5.21	NAME					
STREET ADDRESS			5.3 \$	STREET #	ADDRESS			÷	
CHY-ST-ZIP			5.4 CITY-		-ZIP		····	Observed	1 4 3 4 2 .
TITLE		☐ DELETE		TITLE	ŀ		ı	Change	Addition
NAME		•	•	NAME					
STREET ADDRESS			6.3 5	STREET A	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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP