COF	PROFIT RPORATION UAL REPORT 1996	Sand Sect	PARTMENT OF STATE ra B. Mortnam retary of State DF CORPORATIONS			
DOCUMENT # <b>H74446</b> (6)						
<ol> <li>Corporation</li> </ol>	AMERICAN PROPERTIES I	(*)	PORATIO	I JASFANI SINI MAN AKAN ANAN ANA	(8 8141 <b>816</b> 11 81811 <b>81</b> 111	kiāji kiājā Ujuai cari
Principal Place of Business         Mailing Address           1501 SHEPARD RD STE 5         P O BOX 6271           PO BOX 6271         LAKELAND FL 33807-6271						
LAKELAND FL 33807-6271 US US				Date Incorporated or Qualified     09/04/1985	3a. Date of La:	st Report <b>1995</b>
<ol> <li>Principal P</li> </ol>	face of Business	2a. Mailing Address 26		4. FEI Number 59-2667986	-	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		.75 Additional ee Required
City & State 23	e	City & State		Election Campaign Financing     Trust Fund Contribution	\$5	.00 May Be
Zıp 24	Country 25	2ip <b>29</b>	Country 30	8. This corporation has liability for Florida Statutes Yes	r intangible tax unde	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New	Registered Agent	
	JOHN PAUL			Address (P.O. Box Number is Not Accepta		
	OUTH FLORIDA AVE		82 Street A	Address (P.O. Box Number is Not Accepta	ble)	
LAKELA	ND FL 33803		83			
			84 Oity	7584	85	Zıp Code
11. Pursuant t or register familiar wit	to the provisions of Sections 607.050; red agent, or both, in the State of Flori th, and accept the obligations of, Sec	2 and 607.1508 Florida Statu ida Such change was authori tion 607.0505 Florida Statuta	rles, the above named co zed by the corporation's	rporation submits this statement for the publicand of directors. Thereby accept the app	rpose of changing i pointment as registe	ts registered office red agent. I am
SIGNATURE	Signature typed or product name of registered again		Oth Rejectived Agest soprature is	en e		
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIREC	TORS IN 12
TITUE	PST HODGES CARLTON D	DELETE	TETIZLE		Chan	
NAME STORES ADDOSES	HODGES, CARLTON D. 222 WOODHALL DRIVE		1.2 NAME			
STREET ADDRESS CITY - ST - ZIP	MULBERY FL		13 STREET ADDRESS			
TITLE		DELETE	1.4 CITY - ST - ZIF 2.1 TITLE			
NAME	WENDEL, JOHN F.	<u></u>	2.2 NAME		☐ Chang	g⊭ [] Addition
STREET ADDRESS	5300 S. FLORIDA AVENUE		2.3 STREET ADDRESS			
DITY-ST-ZIP	LAKELAND FL		2.4 CHY - ST - 7IP			
Trīle		☐ DELETE	3 I TIFLE		Chang	ge 🔲 Addition
HAME Street Address			3 2 NAME			
DITY - ST - ZIP			3.3 STREET ADDRESS			1
ITLE		□ DELETE	3.4 CFTY - ST - ZIP 4.1 TITLE		Chang	e Addition
IAME			4.2 NAME		L Orlang	∾ L] ∧uuiiuii
TREET ADDRESS			4.3 STREET ADDRESS			
CITY-SI-ZIP			4.4 C(TY - ST - 2)F			
TITLE		☐ DELF16	5 1 TIT_E		Chang	e 🔲 Addition
IAME TREET ADDRESS			5.2 NAME			i
DIY-SI-ZIP			5.3 STREET ADERESS			
TLE		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Chang	Addison
					LJ Chang	e 🔲 Add:tion

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 12 thanged or on an attachment with an address

6.4 CITY - ST - ZIP

6.2 NAME

6.3 STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE: Carlton D. Hodges, Pre 5

4/29/96 941 646-4680