## 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 # H87508

(8)

SPRINKLE, SEELEY & SPRINKLE, INC.

Principal Place of Business 18115 U.S. HWY 41 NORTH SUITE 600		Mailing Address	Mailing Address  18115 U.S. HWY 41 NORTH			l illutert gibt effet inant Arfie Caint iner antite diete After Arner anner abatt ener			
		18115 U.S. HWY 41 NORT SUITE 600						,	
LUTZ FL 33549		LUTZ FL 33549-4481				i i			
SUIS IS SWITE		2012 12 4000 1101				3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1996			
2. Principat Pl	ace of Business	2a. Mailing Address				4. FEI Number	1	<u> </u>	Applied For
21		26				59-2621448		1	Not Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.				C. O. Williams of Other Business	X	\$8.7	5 Additional
22		27				5. Certificate of Status Desired	Щ	Fee	Required
City & State	)	City & State				6. Election Campaign Financing		\$5.0	0 May Be
23		28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Zip	Coun	try		8. This corporation has liability for			r s. 199.032,
4 25 29 3									
	9. Name and Address of Curre	ent Registered Agent		N4 1 11		10. Name and Address of New I	tegistered	Agent	
	inkle, robert r.		- 1	B1 N	ame				
18115 US HWY 41 NORTH				82 S	2 Street Address (P.O. Box Number is Not Acceptable)				
	E 600		1						
LUTZ	Z FL 33549		i'	B3					
			l t	94 C	ty	***************************************		85 Z	p Code
							Fl		•
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was a	authorized	by the	med corpo corporation	pration submits this statement for the on's board of directors. I hereby acc	ept the ap	of changing pointment	) its registered as registered
SIGNATURE	Signature typical or printed name of registered a	<u> </u>			ant un secules	d when reinstating)	DATE		
12.		ND DIRECTORS	13.	Agent sig	mature require	ADDITIONS/CHANGES TO OF		D DIRECTO	ORS IN 12
TITLE	SD	DELETE	1.1 101	F	V		TOET O THE	Chang	
NAME	SEELEY, RONALD L.	head District	1.2 NA		m	ARU M SPRINKLE			24,
STREET ADDRESS	3000 WEST BUFFALO AVE			eet add	l 10	ARY M. SPRINKLE 13 HASTINGS CT			
	TAMPA FL					TZ, FL 33549			
CITY-ST-ZIP TITLE	PD	DELETE	2.1 T(T)	r-ST-211	5	, _ , , , _ , _ , _ , _ , _ , _		☐ Chang	e X Addition
NAME	SPRINKLE, GEORGE R.	, becere	2.2 NA			DITH W. SPRINKLE	,		
1	1013 HASTINGS CT			EET ADD	ممدا	HASTINGS CT			
STREET ADDRESS	LUTZ FL			Y-ST-Z		TZ , FL 33549			
CHTY-ST-7IP TITLE	TD	DELETE	3.1 7171		P/			Chang	e Addition
1	SPRINKLE, ROBERT R.		3.2 NA			BERT R. SPRINKLE	-	RESP CHANG	7.00
NAME	1001 HASTINGS CT				. مبا	OI HASTINGS CT			
STREET ADDRESS	LUTZ FL		1	EET ADD		TZ FL 33549			
					P .				e Addition
Cily-SI-ZIP	LUIZ FL	T DELETE	3.4, CIT			٨	······································	Chanc	
TITLE	LUIZ FL	DELETE	4.1 T(T)	Ę		NALD L. SEELEV		Chang	
TITLE NAME	LOIZ FL	DELETE	4.1 T(T) 4. 2 NA	.e Me		NALD L. SEELEY	ER KII	Chang	<b>1</b> 0
TITLE NAME STREET ADDRESS	LOIZ FL	DELETE	4.1 TITO 4. 2 NA 4.3 STE	.E Me EET ADD	T/ RD. BESS 3C	NALD L. SEELEY 2000 W. MARTIN LUTH	ER KII	VG BL	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LOIZ FL		4.1 TITO 4.2 NA 4.3 STR 4.4 CIT	.E Me Eet add Y-St-Zii	T/ RD. BESS 3C	D NALD L. SEELEY DOO W. MARTIN LUTH MPA, FL	ER KII	VG BL	/ <b>b</b>
TITLE NAME STREET ADDRESS CHY-ST-7P TITLE	LOIZ FL	☐ DELETE	4.1 TITO 4.2 NA 4.3 STE 4.4 GIT 5.1 TITO	.e Me Eet add Y-St-ZII .e	T/ RD. BESS 3C	NALD L. SEELEY 2000 W. MARTIN LUTH	IER KII	Chang Chang	/ <b>b</b>
TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME	LOIZ FL		4.1 TITU 4.2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NA	.e Me Beet add Y+St-ZII .e Me	T/ROS	NALD L. SEELEY 2000 W. MARTIN LUTH	ER KII	VG BL	/ <b>b</b>
TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS	LOIZ FL		4.1 TITO 4.2 NA 4.3 STF 4.4 CIT 5.1 TITO 5.2 NAP 5.3 STF	E ME EEET ADD Y-ST-ZII E ME	T/ROG 3C	NALD L. SEELEY 2000 W. MARTIN LUTH	IER KII	VG BL	/ <b>o</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	LOIZ FL	☐ DELETE	4.1 TITO 4.2 NA 4.3 STF 4.4 CIT 5.1 TITO 5.2 NAP 5.3 STF 5.4 CIT	.E Me Eet Add Y-ST-ZII .E Me Me Eet Add Y-ST-ZII	T/ROG 3C	NALD L. SEELEY 2000 W. MARTIN LUTH	IER KII	VG BL	<b>∕ \</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADORESS CITY-ST-2IP TITLE	LOIZ FL		4.1 TITO 4.2 NA 4.3 STF 4.4 CIT 5.1 TITO 5.2 NA 5.3 STF 5.4 CIT 6.1 TITO	E Me Y-ST-ZII E ME ME EEET AOD Y-ST-ZII	T/ROG 3C	NALD L. SEELEY 2000 W. MARTIN LUTH	IER KII	VG BL	<b>∕ \</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	LOIZ FL	☐ DELETE	4.1 TITU 4.2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NAF 5.3 STF 5.4 CIT 6.1 TITU 6.2 NAF	E ME Y-ST-ZII E ME ME Y-ST-ZII E	RESS TA	NALD L. SEELEY 2000 W. MARTIN LUTH	IER KII	VG BL	<b>∕ \</b> Addition
TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	LOIZ FL	☐ DELETE	4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA 5.3 STF 5.4 CIT 6.1 TITI 6.2 NAJ 6.3 STF	E ME EET ADD Y-ST-ZII E ME EET ADD Y-ST-ZII E ME	RESS PRESS	NALD L. SEELEY 2000 W. MARTIN LUTH	IER KII	VG BL	<b>∕ \</b> Addition
TITLE NAME STREET ADDRESS CITY-ST-7IP		☐ DELETE	4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NA 5.3 STF 6.1 TITI 6.2 NA 6.3 STF 6.4 CIT	E ME Y-ST-ZII E ME Y-ST-ZII E Y-ST-ZII E ME V-ST-ZII E ME ME V-ST-ZII E V-ST-ZII	RESS PRESS	NALD L. SEELEY DOO W. MARTIN LUTH MPA, FL		Chang	re ☐ Addition
TITLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 14. I do herebinformation	by certify that the information suppl on indicated on this annual report o	DELETE  DELETE  DELETE  lied with this filing does not qualify supplemental annual report is	4.1 TITUE 4.2 NA 4.3 STF 4.4 CIT 5.1 TITUE 5.2 NAU 5.3 STF 5.4 CIT 6.1 TITUE 6.2 NAU 6.3 STF 1.4 CIT 6.5 TITUE 6.4 CIT 6.5 TITUE 6.5 TITUE 6.5 TITUE 6.5 TITUE 6.7 TIT	E ME EET ADD Y-ST-ZII EET ADD Y-ST-ZII E ME EET ADD Y-ST-ZII EET ADD Y-ST-ZII EET ADD	RESS RESS RESS RESS Ress And that	NALD L. SEELEY 2000 W. MARTIN LUTH	utes. I furth	Changer certify the as if made	Addition  Addition  Addition  at the under oath; that

**SIGNATURE** 

Robert R. Sprinkle

2/197 (813)949-7449

**FILED** 

Feb 11 1997 8:00am

Secretary of State