## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

(8)

**FILED** May 01 1998 8:00am Secretary of State

741 DACCO DRIVE P.O. BOX 2789 COOKEVILLE TN 38502 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For		O/DETROIT OF FLORIDA, INC					
2. Mailing Address   2. Mailing Address   4. FEI Number   Applied For 22   22   Suite, Apt #, etc.   22   Suite, Apt #, etc.   22   Suite, Apt #, etc.   23   Suite, Apt #, etc.   25   Suite, Apt #, etc.   27   Suite, Apt #, etc.   28   Suite, Apt #, et	P.O. BOX 2789  COOKEVILLE TN 38502  P.O. BOX 2789  COOKEVILLE TN 38502				<u> </u>	IIS SPACE	
22. Mainty Address   Section Continues   Secti	, w		US				
Sulfie, April # etc.	2. Principal P	lace of Business	2a. Mailing Address			Applied For	
Coty & State	21		26		62-1258128	<del></del>	
27	Suite, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired		
Trust Fund Contribution   Added to Fees   2/p   2/p   Country   2/p   5/p							
Zip Country 2p Country 2p Country 2p Country 8 Principal Property Tax due June 30			<del></del>		, ,		
Personal Property Tax due Juine 3.0		Country		Country	<del></del>		
Part   CT CORPORATION SYSTEM   1200 S. PNE ISLAND ROAD   1200 S. PNE		<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>	1 '		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508; Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Strict of Trioda Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or handler with, and accept the objection 607.0502 and 607.1508; Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am handler with, and accept the objection 607.0505, Pforida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TITLE  PALL JAMES N. 12 NAME  12. NAME  13.08 SOUTH MAPLE AVENUE  COOKEVILLE TN  14.017-ST-2P  13.08 SOUTH MAPLE AVENUE  COOKEVILLE TN  13.09 SOUTH MAPLE AVENUE  COOKEVILLE TN  13.09 SMAPLE AVE  22. SIRECT ADDRESS  CITY-ST-2P  13.09 SOUTH MAPLE AVENUE  13.09 SOUTH MAPLE AVENUE  23. SIRECT ADDRESS  CITY-ST-2P  13.09 SMAPLE AVE  24.017-ST-2P  15. Change Addition  Addition  ANAE  32. NAME  32. NAME  33. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  Addition  ANAE  33. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  Addition  ANAE  43. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  27. NAME  32. NAME  33. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  27. NAME  33. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  27. NAME  33. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  27. NAME  28. SIRECT ADDRESS  CITY-ST-2P  17. TITLE  18. Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  28. TITLE  18. Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. TITLE  ADDITIONS/CHANG							
PLANTATION FL 33324    Sections	Of CONTOUNION COLEM						
PLANTARION FL 33324  B8   City   FL   85   Zip Code    11. Pursuant to the provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or membrane manufacture of the purpose of changing its registered agent, or both, in the State of Florida, Statutes and authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes and authorized when remittening).    Intermediate   Intermediate	1 102 3086 7				ress (P.O. Box Number is Not Acceptable)	<del></del>	
11. Pursuant to the provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Statutes agent, and accept the obligations of, Socione 607 05:06, Florida Statutes agent, and accept the obligations of, Socione 607 05:06, Florida Statutes agent, and accept the obligations of, Socione 607 05:06, Florida Statutes agent, and accept the obligations of the appointment as registered agent, and accept the obligations of the appointment as registered agent, and accept the obligations of the appointment as registered agent, or both, in the State of Corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Corporation's board of directors. I hereby accept the appointment as registered agent, or both in the afficient agent, and accept the obligation of the appointment as registered agent, or both and accept the obligations of the purpose of change agent, and accept the obligation of the appointment as registered agent, and accept the obligation of the appointment as registered agent, and accept the obligation of the appointment as registered agent, and accept the obligation of the appointment as registered agent, and accept the obligation of the purpose of changes and accept the obligation of the purpose of changes and accept the appointment as registered agent, and accept the appointment as registered advantages and accept the appointment as registered a	PL/	ANTATION FL 33324					
11. Pursuant to the provisions of Sections 607 0:002 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I are flamilar with, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent and market with corporation's board of directors. I hereby accept the appointment as registered agent agent and the displacement of socione 607 0:505, Florida Statutes  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  HALL, JAMES N.  13 STREET ADDRESS  CITY-ST-2P  THE HALL, COLEEN  1330 SOUTH MAPLE AVENUE  13 STREET ADDRESS  CONCEVILLE TN  14 CONCEVILLE TN  1330 S MAPLE AVE  22 NAME  1330 S MAPLE AVE  23 STREET ADDRESS  CONCEVILLE TN  22 NAME  1330 S MAPLE AVE  23 STREET ADDRESS  CONCEVILLE TN  22 NAME  1330 S MAPLE AVE  23 STREET ADDRESS  CONCEVILLE TN  24 CHTY-ST-2P  TITLE  SPENCE, ROBERT N.  35 STREET ADDRESS  CITY-ST-2P  TITLE  SPENCE, ROBERT N.  35 STREET ADDRESS  CITY-ST-2P  TITLE  DELETE  DELETE  DELETE  DELETE  OFFICERS AND DIRECTORS IN 12  TITLE  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  AMAE  STREET ADDRESS  CITY-ST-2P  TITLE  DELETE  DELETE  OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  AMAE  STREET ADDRESS  CITY-ST-2P  TITLE  DELETE  OFFICERS AND DIRECTORS SCALLE TN  Change Addition  AMAE  STREET ADDRESS  CITY-ST-2P  TITLE  Change Addition  Additio	i			83			
11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Floridal Stellutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the State of I fords Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agrature required when remarked or provisions and provisions. I hereby accept the appointment as registered agent agrature required when remarked agent agrature required agent agrature req	1			84 City		85 Zip Code	
SIGNATURE   Signature, typed to pursed represent any ordinal agend and their dissiplantation (NOTE Regulated Agend signature required when reregizating)   DATE	44 0	10-11-07-07-07-07		45-25-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-			
SIGNATURE   Signature, typed to pursed represent any ordinal agend and their dissiplantation (NOTE Regulated Agend signature required when reregizating)   DATE	office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State	r and 607.1508, Florida Statut of Florida. Such change was a	es, the above-named corp authorized by the corporat	poration submits this statement for the purpos tion's board of directors. I hereby accept the	e or changing its registered appointment as registered	
Signature, typed or personal rate or transport and agreed and that it displaced and for the control of the co	agent. f a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flo	orida Statutes.			
12. OFFICERS AND DIRECTORS 1.2  TITLE	SIGNATURE	Signature, board or control pages of registered some	d and title if producable (NOT	F. Flenistered Agent signature requir	red when reinstation). DAT		
NAME STREET ADDRESS CITY-ST-ZP COOKEVILLE TN  TITLE WAME STREET ADDRESS CITY-ST-ZP TITLE TITLE SPENCE, ROBERT N. STREET ADDRESS CITY-ST-ZP TITLE SPENCE, ROBERT N. STREET ADDRESS CITY-ST-ZP TITLE SPENCE, ROBERT N. STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-ZP TITLE SPENCE, ROBERT N. STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-	12.			<del></del>			
1330 SOUTH MAPLE AVENUE	TITLE	P	☐ DELETE	1.1 TITLE		Change Addition	
COTY-ST-ZP	NAME			1.2 NAME		ļ	
DELETE   Change   Addition	STREET ADDRESS			1.3 STREET ADDRESS			
MAME STREET ADDRESS CITY-ST-ZIP TITLE TS DELETE 31 TITLE SPENCE, ROBERT N. 32 MAME SPENCE, ROBERT N. 33 STREET ADDRESS CITY-ST-ZIP TITLE T	CATY - ST - ZIP	COOKEVILLE TN		1.4 CITY - ST - ZIP			
1330 S MAPLE AVE	TITLE	V	☐ DELETÉ	2.1 TITLE		Change Addition	
COOKEVILLE TN						ľ	
TITLE	, , , , , ,			2 3 STREET ADDRESS			
SPENCE, ROBERT N.   32 NAME   33 STREET ADDRESS   COOKEVILLE TN   34. CITY - ST - ZIP   TITLE   Change   Addition			Dotiett			L Obassa L Legitica	
STREET ADDRESS   S28 GRAMAR   33 STREET ADDRESS   COOKEVILLE TN   34. CITY-ST-ZIP	[	· •	☐ DETEIR		•	☐ CHANGE ☐ ADDUITOR	
COOKEVILLE TN   34. CITY-ST-ZIP     Change   Addition						I	
DELETE	1 1			I i			
NAME			DELETE			Change Addition	
STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP							
A CITY-ST-ZIP	! !					)	
TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         STREET ADDRESS         CITY-ST-ZIP         Change         Addition           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME         CTY-ST-ZIP         CTY-ST-ZIP           CITY-ST-ZIP         6.4 CTY-ST-ZIP         CTY-ST-ZIP	l i					İ	
STREET ADDRESS			☐ DELETE			☐ Change ☐ Addition	
	NAME			5.2 NAME		]	
TITLE	STREET ADDRESS			5.3 STREET ADDRESS		j	
NAME  STREET ADDRESS  CITY-S1-ZIP  6.2 NAME  6.3 STREET ADDRESS  6.4 CITY-S1-ZIP	CITY-ST-ZIP			5.4 CITY-ST-ZIP			
STREET ADDRESS  CITY-ST-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP	TITLE		☐ DELETE	6.1 TITLE		L. Change    Addition	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME						
	STREET ADDRESS			6.3 STREET ADDRESS		4	
			Calcia Circa da Calcia de		C		

indicated on this annual report or supplied with this hing does not qualify for the exemple 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 and officer or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changed, or an additional with an address

Robert N. Spence, Treasurer4-23-98

931-528-7581