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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H90639

(6)

IASIE IEMPIEH PANCANE	inn, inc.
Principal Place of Business	Mailing Address
% GERALD M. GLOVER 2310 W. MAIN ST. LEESBURG FL 34748	% GERALD M. GLOVER 2310 W. MAIN ST. LEESBURG FL 34748-4605

FILED
Mar 18 1997 8:00am
Secretary of State

Principal Plac % GERALD M. 2310 W. MAIN LEESBURG FL	Mailing Address % GERALD M. GLOVER 2310 W. MAIN ST. LEESBURG FL 34748-4605			3. Date Incorporated or Qualified 3a. Date of Last Report				
					3. Date Incorporated or Qualified 12/16/1985	34. Date of 03/26/		port
2. Principal F 21 23/2	Place of Business D. W. MAIN St.	2a. Mailing Address 26 23/0 W	MAL	u Sti	4. FEI Number 59-2625517		Apı	plied For t Applicable
Suite Apt		Suite, Apt. #, etc.	, ,,, .,		5. Certificate of Status Desired		8.75 A	dditional
City & Stat	10	City & Stale			6. Election Campaign Financing		\$5.00	
23 LE	ESBURG, FLA.	28 LEESBURG			Trust Fund Contribution		Added to	
7 Zip 34	748 25 LAKE	29 34748	30 Cou	LOKE	8. This corporation has liability for Florida Statutes	intangible tax Ves 0 N		199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Age	nt	
	OVER, GERALD M.			81 Name				
	0 W. MAIN ST. SBURG FL 34748			82 Street Add	lress (P.O. Box Number is Not Accepta	ble)		
LLL	.000NO 1 E 04/40			83				
				84 City		Te	35 Zip C	`ode
					poration submits this statement for the	<u> </u>		
office or i	registered agent, or both, in the State man familiar with, and accept the oblight make transmission to the state of the st	e of Florida. Such change was a gations of, Section 607.0505, Flo	uthorized orida Stat	1 by the cornora	ition's board of directors. I hereby acce	ept the appoint	Iment as i	registered
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DI	RECTOR	
1-TLF	DP OF OF OF O	☐ DELETE	1.1 70	rlē.			Change	Addition
NAME	GLOVER, GERALD M. 2310 W. MAIN ST.		1.2 NA	1				
STREET ADDRESS	LEESBURG FL		1	REET ADDRESS				
CHY-ST ZIP TITLE	D	DELETE	2.1 71	TY-ST-ZIP ILE			Change	Addition
NAMI	GLOVER, SANDRA F.		2 2 NA	· ·			-	
SUBEET ADORESS	2310 W. MAIN ST.							
City-St-ZiP			23 ST	REET ADDRESS	•			
Chianglian	LEESBURG FL			REET ADORESS	:			
TIFLE	LEESBURG FL	DELETE	2 4 C	ITY-ST-ZIP	:	· ·	Change	Addition
TITLE NAME		DELETE	2 4 C	HTY-ST-ZIP FLE		· .	Change	Addition
TITLE NAME SIPELI ADDRESS		DELETE	2 4 C 3 1 TH 3.2 NA 3.3 ST	ITY-ST-ZIP TLE MME REET ADDRESS	·		Change	Addilion
THE NAME SIPELL ADDRESS OUT-ST ZIP		☐ DELETE	2 4 C 3 1 TH 3.2 NA 3.3 ST	HY-ST-ZIP TLE ME TREET ADDRESS ITY-ST-ZIP	:		Change Change	Addition
TITLE NAME SIRELL ADDRESS			2 4 C 3 1 TH 3.2 NA 3.3 ST 3.4 C	ITY-ST-ZIP TLE UME REET ADDRESS ITY-ST-ZIP TLE	:			
TITLE NAME SIRELLADURESS CITY-ST ZIP TITLE			2 4 C 31 TB 3.2 NA 3.3 ST 34. C 4.1 TF 4.2 NA	ITY-ST-ZIP TLE UME REET ADDRESS ITY-ST-ZIP TLE	:			
TITLE NAME SIRELLADORESS COTY-ST-ZIP TITLE NAME			2 4 C 31 TH 3.2 NA 3.3 ST 34 C 4.1 TH 4.2 NA 4.3 ST	ATY-ST-ZIP FLE MME REET ADDRESS ITY-ST-ZIP FLE AME				
TITLE NAME SIRRET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS			2 4 C 31 TH 3.2 NA 3.3 ST 34 C 4.1 TH 4.2 NA 4.3 ST	ATY-ST-ZIP TLE MME TREET ADDRESS ITY-ST-ZIP TLE AME REET ADORESS TY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-SE ZIP		DELETE	2 4 C 3 1 TB 3.2 NA 3.3 ST 34. C 4.1 TF 4. 2 NA 4.3 ST 4.4 CF	ATY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE			Change	Addition
THE NAME SPEEL ADDRESS OF Y-ST-ZP THE NAME STREET ADDRESS OF Y-ST-ZP THE		DELETE	2 4 C 31 TR 32 NA 33 ST 34 CC 41 TF 4 2 NA 43 ST 44 CC 51 TF 52 NA	ATY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE			Change	Addition
THE NAME SPEEL ADDRESS CITY-ST ZP THLE NAME SPEEL ADDRESS CITY-ST ZP HILE NAME SPEEL ADDRESS CITY-ST ZP HILE SPEEL ADDRESS CITY-ST ZP		DELETE DELETE	2 4 C 31 TH 3.2 NA 3.3 ST 3.4 CC 4.1 TF 4.2 NA 4.3 ST 4.4 CC 5.1 TF 5.2 NA 5.3 ST 5.4 CC	ITY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP			Change	Addition Addition
THE NAME SIRELI ADDRESS CITY-SI-ZIP THLE NAME SIRELI ADDRESS CITY-SI-ZIP HILE SIRELI ADDRESS CITY-SI-ZIP THLE		DELETE	2 4 C 3 1 TH 3.2 NA 3.3 ST 3.4 CC 4.1 TF 4.2 NA 4.3 ST 4.4 CC 5.1 TF 5.2 NA 5.3 ST 5.4 CC 6.1 TF	ITY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP			Change	Addition
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THE NAME SIRELI ADDRESS CITY-SI-ZIP THLE NAME SIRELI ADDRESS CITY-SI-ZIP HILE SIRELI ADDRESS CITY-SI-ZIP THLE		DELETE DELETE	2 4 C 31 TH 3.2 NA 3.3 ST 3.4 CC 4.1 TF 4.2 NA 4.3 ST 5.4 CC 5.1 TF 5.2 NA 5.3 ST 6.2 NA 6.3 ST	ITY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP			Change	Addition Addition

Lab include y certain their time mony gradient supplied with his pring does not qualify for the exemption stated in Section 119.07(3)(I). Provide Statutes, 1 further certify that the information indicated on this arguest report or suppliemental 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 receipting trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block, 12 or Block, 3 if chapped or on an algorithment with an address.

SIGNATURE: