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

DOCUMENT #

(7)

A & R OF KISSIMMEE, INC.

KISSIMMEE FL 34744

FILED May 19 1998 8:00am Secretary of State

Zip Code

ncipal Piace of Business /O RAYMOND R. SESSIONS. JR. IS LAKESHORE BLVD. SSIMMEE FL 34744		Mailing Address C/O RAYMOND R. SESSIONS, JR. 625 LAKESHORE BLVD. KISSIMMEE FL 34744			n someone describentes canto canto estato en estato esta estato esta	te demai dence annie merse sadi		
					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 02/05/1986			
Principal Place of Business		2a. Mailing Address 26			4. FEI Number	Applied For		
					59-2804298	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country 25	Zip 29	30 Co.	untry	8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30.			
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent				
	IONS, RAYMOND R., JR.			B1 Name				
625 LAKESHORE BLVD.			82 Street Address (P.O. Box Number is Not Acceptable)					

83 84 City

Street Address (P.O. Box Number is Not Acceptable)

office of the agent. La	to the provisions of Sections 607.0502 and 607.1508, Flor registered agent, or both, in the State of Florida. Such cha im familiar with, and accept the obligations of, Section 607	ida Statules, nge was autl 7.0505, Floric	the above-named co horized by the corpor. Ia Statules.	rporation submits this state ation's board of directors.	ement for the purpose of the app	oointment as	s registered registered
SIGNATURE	Storature, typed or profiled name of reasterns again and title if applicable		egistered Agent signature reg		DATE		
12.	OFFICERS AND DIRECTORS	- (1011.11	13.		GES TO OFFICERS ANI	D DIRECTOR	S IN 12
TITLE	TO	ELETE	1,1 IIILE			Change	☐ Additio
IAME	S ESSIONS, RAYMOND, R		1,2 NAME				
TREET ADDRESS	625 LAKESHORE BLVD.		1.3 STREET ADDRESS				
HTY-ST-ZIP	KISSIMMEE FL		1.4 CITY-ST-ZIP				
ITLE		ELETE	2.1 TITLE			Change	☐ Additio
IAME	SE SSIONS, STEPHEN A		2.2 NAME				
TREET ADORESS	625 LAKESHORD BLVD		2.3 STREET ADDRESS				
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STREET ADDRESS	•		6.3 STREET ADDRESS				
מול דם עדור			CACITY CT 7ID				

14. Thereby 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 fine 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 trusted 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 my address.