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 # H99999

(5)

EAST PASCO DEVELOPMENT COMPANY

A REMOVEMENT DIVERTIFICATION OF THE CONTROL OF THE	

FILED

Apr 21 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address						A IMMIBUL DISA IMEGA IMEGA OMISA SPOTA GAIL		E1E() 919() (09)	
W LEWIS B. M.	ULEVARD	% LEWIS B. MCKELL 5801 GALL BOULEVARD 75011/00/1111 S. El. 20541-2							
ZEPHYRHILLS (rc 83341	SELLIMITED LE 20241	MUU			3. Date Incorporated or Qualified 02/17/1986	3a. Date of La		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	Applied For	
21		26				NOT APPLICABLE Not Applicable			
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional			
22		27				Fee Required			
City & State	•	City & State				6. Election Campaign Financing \$5.00 May Be			
23 Zip				ntry		Trust Fund Contribution			
	25	29	30	i iti y		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
24	9. Name and Address of Curren		[30]			10. Name and Address of New Registered Agent			
MCK	(ELL, LEWIS B.			61	Name		-		
	48 CHANCEY ROAD		- 1	_	O	70 O D. Al			
	HYRHILLS FL 34248			62	Street Adore	ess (P.O. Box Number is Not Acceptable	ej		
			Ì	83					
•			1	B4	Cit.		lor l	7in Code	
2.5			ļ	- 1	City		FLI	Zip Code	
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 State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE			TE. Day store			d a han related and	DATE		
12.	Signature, typed or printed name of registered age OFFICERS AND		13.	Ago:	nt signature require	ADDITIONS/CHANGES TO OFFICE		TORS IN 12	
TITLE	D	DELETE	11 10	LF		7,00110103,017,11020 10 011101	Cha		
NAME	MCKELL, LEWIS B.								
STREET ADDRESS	35648 CHANCEY ROAD		1,3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	ZEPHYRHILLS FL		1.4 CI	Y-\$1	T - Z IP			ĺ	
TITLE			2.1 117				☐ Cha	nge Addition	
NAME	BREWER, KATHERINE M.		2.2 NAME						
STREET ADDRESS	5801 GALL BLVD.		2.3 \$1	REET.	ADDRESS				
CITY-ST-ZIP	ZEPHYRHILLS FL		2. 4 CITY - ST - ZIP		67 - ZIP				
TITLE	D	☐ DELETE	3.1 111	LE			☐ Cha	nge 🔲 Addition	
NAME	MCKELL, DAVID H.		3.2 NA	ME					
STREET ADDRESS	•••		3.3 ST	REET.	ADDRESS				
CITY-ST-ZIP	PALMETTO FL		3.4 CI		17 - ZIP		-		
TITLE	D OLIANII ABBUII	☐ DELETE	4.1 711				∐ Cha	nge L.J Addition	
NAME	GHANI, ABDUL		4. 2 N/		1				
STREET ADDRESS	6821 GALL BLVD.				ADDRESS				
CITY-\$T-ZIP	ZEPHYRHILLS FL	Doruge	4.4 CI		T- 21P		Cha	nge Addition	
TITLE		OELETE	5.1 1(1				∟ Cila	inge C Modition	
NAME			5.2 NA		1000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CIT		1-ZIP		Cha	nge Addition	
TITLE			6.1 TIT				Olia	ingo ET Logistofi	
NAME :			6.2 NA		YDDDECC				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	on the that the information supplies	d with this filing does not awa	6.4 CH			in Section 119 07/3\(\)(i) Florida Statutes	I further certify	that the	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, Flurther 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 13 if changed, or on an attachment with an address.

1/4/ 1/2 h 1 1/4 . M 1