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 #

(2)

FILED Feb 11 1998 8:00am Secretary of State

PELTOI	LA ENTERPRISE, INC.					
Principal Place	e of Business	Mailing Address				
% PAUL E. FI	FLD	% PAUL E. FIELD				
1915 TALLY F	1915 TALLY ROAD	TALLY ROAD			DO NOT WOITE IN THIS SOME	
LEESBURG FL	. 34748	LEESBURG FL 34748				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
9 Principal P	ace of Business	2a. Mailing Address	2a Mailing Address			09/17/1986 4. FEI Number Applied For
—	ide of Dushibas	26				59-2714938 Not Applicable
Sulte, Apt.	# etc	Suite, Apt. #, etc.				C
22		<u> </u>	27			5. Certificate of Status Desired Fee Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	intry	i	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
	LD, PAUL E.			81	Name	
	5 TALLY RD			82	Street A	Address (P.O. Box Number is Not Acceptable)
LEE	SBURG FL 34748			83		
				03		
				84	City	FL 85 Zip Code
dd Diwarant	to the provisions of Eastions 607 Of	D2 and C07 1509 Florida Cta	uton the e		nomod o	
office or re	egistered agent, or both, in the State	e of Florida. Such change wa	s authorize	d by	the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. La	m lam iliar with, an d a ccept the oblig	gations of, Section 607.0505,	Florida Stat	tutes	3.	
SIGNATURE	Signature, typed or printed name of registered ag	agent and title if granic style: (A)	OTE Begislore	d Ano	ont Evapet was	e required when reinstating) DATE
12.		VD DIRECTORS	13.	u ngu	ont eignature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE		1.1 TOLE		☐ Change ☐ Addition
NAME	FIELD, PAUL E.		1.2 N/	1.2 NAME		
STREET ADDRESS	11040 AAID 1111111 BB		1.3 \$1	REET	ADORESS	
CITY-ST-ZIP	LEESBURG FL		1.4 CITY - S		T- ZIP	
TITLE	D	☐ DELETÉ	2.1 71	TLE		☐ Change ☐ Addition
NAME	FIELD, JUDITH R.		2.2 N	2.2 NAME		
STREET ADDRESS	******		2.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	LEESBURG FL		2.4 C	ITY-S	ST-ZIP	
TITLE		☐ DELETE	3.1 11	TLE		☐ Change ☐ Addition
NAME			3.2 N/	AME]	
STREET ADDRESS			3 3 ST	REET	ADDRESS	
CITY-ST-ZIP		The second			ST-ZIP	
TITLE		☐ DELETE	4 1 T)			Change Addition
NAME			4 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CI		T-7IP	Change Addition
TITLE		TT DEFEIG	5.1 711			Lu Change Lut Adollori
NAME			5.2 NA		1000520	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	5.4 CI 6.1 Ti		I · ZIP	Change Addition
		F" DETERIT	6.2 NA			
NAME CTREET ADDRESS					ADDRESS	600002429636 ps.,,
STREET ADDRESS CITY-ST-ZIP	N.		6.3 SI			***150.00
OULL OIL THE	21.		0.4 0	ונייוו) · All	1 1 Section # Se

14. I hereby 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 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.