## 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 # J45178

(7)

FUN TIME PARTY SALES, INC.

Principal Place of Business Mailing Address 2060 S. APOPKA BLVD. P.O. BOX 607825 APOPKA FL \$2703 ORLANDO FL 320			<b>,</b>		-   1301H				
					3. Date Incorporated or Qualifie 12/01/1986	d 3a. Da	ate of Last Re 04/1996	eport	
	ace of Business W HWY 434	2a. Mailing Address 26 P.O. Box 502697			4. FEI Number 59-2762103	Applied For Not Applicable			
Suite, Apt. 12		Suite, Apt. #, etc.				5. Certificate of Status Desired			
City & State 23 <b>Lond</b>	ewood FL	City & State 28			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip 3278	120 -	29 32752	30 <b>S</b> (	ntry MINOLE	8. This corporation has liability Florida Statutes	<b>✓</b> Yes	No	199.032,	
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New	Registered	Agent		
	IS, RUSTY	•			USTY GILLIS			w	
2080 S. APOPKA BLVD. APOPKA FL 32703				82 Street Addre	ess (P.O. Box Number is Not Accer	34/			
74 01	I IN I C OF IND			83					
				<b>S4</b> City			85 Zip (	Code	
				401	NGWOOD	FL	.   3%	2750	
11. Pursuant I office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State in familia, with, and accept the obliq	02 and 607,1508, Florida Statu e of Florida. Such change was	ites, the all authorize	bove-named corp d by the corporati	ionation submits this statement for this ion's board of directors. I hereby ac	ne purpose o cept the app	r changing it pointment as	s registered registered	
agent. La	ni familia with, and accept the oblig	ations of, Section 607.0505, F	lorida Stal	tutes.		1.0	1 82		
SIGNATURE	Speaking type a potential rame of registered ago	ent and title if applicable (NO	T£: Registere	d Agent signature require	ed when reinstating)	DATE	<del>/~ / /</del>		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO O	FICERS AND			
Tillif	PD	☐ DELETE	1.1 1	TLE			L Change	Addition	
NAME	GILLIS, RAYMOND W JR.		1.2 N						
STREET ADDRESS	2215 EARLEAF CT	•		TREET ADDRESS					
C(1) - S1 - Z(P	LONGWOOD FL 32779	DELETE	1.4 C 2.1 T	ITY-ST-ZIP			Change	Addition	
HTLE	GILLIS, DEBORAH L	L Mill	2.1 N				L.J Unange		
NAME STREET ADDRESS	2215 EARLEAF CT		1	TREET ADDRESS					
CHY-ST-ZIP	LONGWOOD FL 32779			CITY - ST - ZIP					
TITLE		DELETE	3.1 1		· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME			3.2 N	AMÉ					
STREET ADORESS			3.3 S	TREET ADDRESS					
CHY-S1-Z01				CITY - ST - ZIP			T 0	Additon	
THILE		DELETE	4.1 T				L Change	Addition	
NAMÉ			1	IAME					
STREET ADDRESS				TREET ADDRESS					
CITY-ST ZIF		DELETE	4.4 C 5.1 T	ITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition	
THEF		- Deret		AME	·		-110.190	learned . John Co. (1)	
NAME OTOLLT ADDULCE				TREET ADORESS					
STREET ADDRESS				ITY-ST-ZIP		•		İ	
CHY-ST-ZIP THEE		DELETE	6.1 T				Change	Addition	
NAME			6.2						
CIDELI VUUDECÇ				TREET ADDRESS					

6.4 CITY-ST-ZIP

SIGNATURE:

14. Ido 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 chapged, or on an attachment with an address.

407.805.9955

**FILED** 

May 12 1997 8:00am

Secretary of State

D HOGHEN ONE OLICE THE BEACH THICK HOGE WITH SHAPE REAL PLANT OLICE ORDER AND A SHAPE