## 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 #
1. Corporation Name J49040

(5)

DELAND	Bar <del>-B</del> -Q enterprises, I	NC.					
Principal Place of Business Mailing Address						THE REAL PROPERTY OF THE PROPE	81811 1888 8
1375 S WOODLAND BLVD. DELAND FL 32720  1375 S WOODLAND BLVD. DELAND FL 32720-7734							
						3. Date Incorporated or Qualified 3a. Date of Last R	eport
4 5:		2a. Mailing Address				12/29/1986 04/01/1996 4. FEI Number I Ap	plied For
	ace of Business	<del></del>				1	t Applicable
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.						- \$8.75 /	
22						5. Certificate of Status Desired Fee Re	
City & State City & State						B. Election Campaign Financing \$5.00	мау во
23		28	<del></del>			Trust Fund Contribution	
Zip	Country	Zip		untry		8. This corporation has liability for intangible tax under s. Florida Statutes 🛣 Yes 🔲 No	199.032,
24	25   9. Name and Address of Curren	29	30	-Т		Florida Statutes XJ Yes L No 10, Name and Address of New Registered Agent	
				81	Name	(U, Italia dio Addisso di Itali Tisgleto de Agric	
PALMETTO CHARTER SERVICES, INC.							
150 MAGNOLIA AVE				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
DAY	TONA BEACH FL 32015			83			
					·		
				84	City	FL 85 Zip	Code
office or re agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation					orporation submits this statement for the purpose of changing li ration's board of directors. I hereby accept the appointment as	
12.	OFFICERS ANI	D DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
TITLE	DP	DELETE 1.1		TITLE		Change	Addition
NAME	TOMLINSON, WILLIAM N.	OMDISON, MILLIAM IV.		NAME	- 1		
STREET ADORESS	1375 S WOODLAND BLVD.				ADDRESS		
CITY-ST-ZIP	DELAND FL	DELEAG		CITY-S	T-ZIP	Change	Addition
TITLE	US1 — 1			2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	ETT HOUSINGS
NAME	TOMLINSON, CAROLYN F.			2.2 NAME 2.3 STREET ADDRESS		7 P	
STREET ACIDRESS	1375 S WOODLAND BLVD.						
CITY-ST-ZIP TITLE	DELAND FL	DELETE		CITY-:	31-21	Change	Addition
NAME			- 8	NAME			]
STREET ADDRESS					ADDRESS		
CITY - \$1 - ZIP			3.4.	. CITY-:	ST-ZIP		
11116		DELETE	4.1	TITLE		☐ Change	Addition
NAME			4. 2	NAME			
STREET ADDRESS			4.3	STREET	ADDRESS		
CITY - S1 - 7IP			4.4	CITY-S	ST-2IP		
THE		☐ DELETE	5.1	TITLE	]"	Change	Addition
NAME			5.2	NAME			
STREET ADDRESS					T ADDRESS		
CITY-S1-ZIP		T"		CITY-S	ST-ZIP	Change	Addition
TITLE		DELETE		TITLE		T Clarite	MORIOI
NAME				NAME			
STREET ADDRESS			1		I ADDRESS	•	
CITY-ST-ZIP			6.4	CITY-	SI-ZIP	, , , , , , , , , , , , , , , , , , ,	

14. 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. 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 addyses. 904 736 3933

**FILED** 

Feb 18 1997 8:00am

Secretary of State