## 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 # **J63208** 

(9)

FILED Jan 17 1997 8:00am Secretary of State

Principal Plac	SER ENTERPRISES, INC.	Mailing Address			
P. O. BOX 1942 P.O. BOX 1 FLGLER BCH: FL 32136 FLGLER BC		2236 S. HWY. A1A P.O. BOX 1847 FLGLER BOH. FL 92186 1847	<u> </u>		
US		US		3. Date Incorporated or Qualific 03/17/1987	ed 3a. Date of Last Report 04/10/1996
	Place of Business BLVI	2a. Mailing Address	21/20	4. FEI Number	Applied For
21 305 Suite, Apt.	GEORGETOWNE	26 P.O.BOX 10 Suite, Apt. #, etc.	0409	59-2795447	Not Applicable  \$8.75 Additional
	TONA BEACH FL	27 DAYTUNA	BEACH FL	5. Certificate of Status Desired	Fee Required
City & Stat	ė į	City & State		6. Election Campaign Financin	\$5.00 May Be
	-119 USA	28 3 2 120	Country Country	Trust Fund Contribution	Added to Fees
Zip /	25 Country	29	io Country	8. This corporation has liability Florida Statutes	for intangible tax under s. 199.032,
	9. Name and Address of Curren		// /	10. Name and Address of New	
BOL	LINGER, WILLIAM R.		81 Name		
	S. HWY ATA		82 Street Add	ress (P.O. Box Number is Not Acce	ptable)
-FLO	LER BCH. FL 32138		83 30	s georgetuwi	BLUP.
		•	84 City D	WITH BEACH	FL 85 Zip Code 32/19
11. Pursuant	to the provisions of Sections 607,0507	and 607 1508, Florida Statutes	s, the above-named cor	poration submits this statement for t	ne purpose of changing its registered
office or i agent 1 a	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au its. of, Section 607.0505, Flor	ithorized by the corpora ida Statutes.	ation's board of directors. I hereby a	ccept the appointment as registered
SIGNATURE	William	K Rolly	Figure Agent's gnature requ		
12.	Signature typed or product time of registers days OFFICERS AND	n and Mai Tapphea (NOTE	13.		DATE FFICERS AND DIRECTORS IN 12
TRILF	D	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change
NAME	BOLLINGER, WILLIAM R.		1.2 NAME	05 GEORGETOWN	SE BLUK.
STREET ADDRESS	2236 S. HWY A1A		1.3 STREET ADDRESS	02 GEOLGE 1001	
CITY - ST - ZIP TIT( F	FLGLER BCH. FL	L DELETE	1.4 C/TY - ST - Z/P 2.1 TITLE	AYTONA BEACH	FL 32 119 Addition
NAME	MICHAEL R BOLLINGER	L' Direct	22 NAME	•	C Gliange
STREET ADDRESS	610 NW 36TH DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		2. 4 CITY-ST-ZIF		
THLE		DELETE	3.1 TITLE		Change Addition
NAME.			3.2 NAME		
STREET ADDRESS			3 3 STREFT ADDRESS		
GHY-ST ZP		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
Tatt, F NAME		C percu	4. 2 NAME		change hounds
STREET ADDRESS			4.3 STREET ADDRESS		
C-TY - S1 - 2IP			4 4 CITY-ST-ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			52 NAME		
STREET ACCURENS			5.3 STREET ADDRESS		
CHY-ST ZIP		DELETE	5.4 CITY~ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
	J		B 0.3 STREET ADDRESS T		
CHY ST-7P			6.4 CITY - ST - ZIP		

14. Edo hereby cert fy 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 suppliencental annual report is true and accurate and that my signature shall have the same legal effect as it 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 thick 13 it changed or on an attackment with an address.

SIGNATURE:

Wheeling the of Bullinger

1-14-97 904-760-677

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