## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED** Mar 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J99311 (9) GRAND ROMANCE, INC. Principal Place of Business Mailing Address C/O NANCI S. YURONIS 433 NORTH PALMETTO AVENUE C/O NANCI S. YURONIS 433 NORTH PALMETTO AVENUE DO NOT WRITE IN THIS SPACE SANFORD FL 32771 SAMFORD FL 32771 3. Date Incorporated or Qualified 10/23/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2945922 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 l Name YURONIS, NANCI S. 433 NORTH PALMETTO AVENUE Street Address (P.O. Box Number is Not Acceptable) R2 SANFORD FL 32771 83 84 City Zip Code 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstalling ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELFTE Addition TITLE 11 TITLE ☐ Change YURONIS, NANCI S. 1.2 NAME 1232 RIDGEWOOD STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BRIGGS, BERTHA LOU NAME 2.2 NAME **188 PARK PLACE** STREET ADDRESS 2.3 STREET ADDRESS LAKE MARY FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE STERNBERG, WILLIAM D. NAME 3 2 NAME **473 LAKE SHORE DRIVE** STREET ADDRESS 3.3 STREET ADDRESS LAKE MARY FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE

14. Thereby 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 constraint or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address

5 1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETÉ

**53 STREET ADORESS** 54 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST- ZIP

Terthe dow Dua SIGNATURE:

TITLE

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

(407)321-5091

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