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**

FILED May 05 1998 8:00am Secretary of State

DOCU	MENT	# K2333	35	(8)					
1		& MAINTENANCI		` '	CORPO				
RATED									
Principal Place	e of Busines	S	Mailin	g Address					
% JEFFREY LIVENGOOD				FFREY LIVENGOOD)				
13221 CHICAGO AVE				13221 CHICAGO AVE			DO NOT WRITE IN THIS SPACE		
HUDSON FL :	34009		HUUS	ON FL 34669			3. Date Incorporated or Qualified		
							05/09/1988		
2. Principal P	lac e o f Busin	ness	2a, Ma	ailing Address			4. FEI Number Applied Fo	ır	
Suite, Apt. #, etc.				ite, Apt. #, etc.			59-3309391 Not Applica		
 				30116, Apr. #, etc.			5. Certificate of Status Desired	1	
City & State				City & State			6. Election Campaign Financing \$5.00 May Be	\neg	
23 2							Trust Fund Contribution		
Zip	Country			Zip Country			8. This corporation owes or has paid the current year Intangible		
24	25 29 9, Name and Address of Current Registere				[30]		Personal Property Tax due June 30. X Yes _ No 10. Name and Address of New Registered Agent		
16/1				- Tigoth	81	Name			
LIVENGOOD, JEFFREY 13221 CHICAGO AVE					82	Ctrool	ddress (P.O. Box Number is Not Acceptable)		
HUDSON FL 34669							Address (F.O. box number is not acceptable)		
	-				83				
				B4 City			y ≘ 85 Zip Code		
44 Durayant	to the provin	iona of Coations CO7 (1500 and 607 t	COD Florido Ctot	toe the show		FL ³³ ^{2p coo}		
office or re	egi ste red ag	ent, or both, in the St	ale of Florida.	Such change was	authorized b	y the cor	ned corporation submits this statement for the purpose of changing its registe corporation's board of directors. I hereby accept the appointment as registers	ed	
	A CY	th, and accept the ob		sction 607,0505, F	iorida Statule	Z.K.1.	Landar Hola 98		
SIGNATURE	Signature, lyped	nled name of regist and			IE Regist ei Ag	ent - gyalure	ature of Quilles When reinstating DATE		
12.		OFFICERS A	AND DIRECTO		18.	10 ,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVD LIVENGOOD, JEFFREY			☐ DELETE			☐ Change ☐ Add	lition [
NAME				1.2					
STREET ADDRESS CITY-ST-ZIP	IHIDOON EI					T ADDRESS	.ss		
TITLE	STD			1.4 CITY-ST-7 DELETE 2.1 Title		SI-ZIP	Change Add	lition	
NAME	LIVENGOOD, KAREN K.				2.2 NAME		_ , _		
STREET ADDRESS	s 13221 CHICAGO AVE			2.3 \$1		ADDRESS	:SS		
CITY-ST-ZIP	HUDSOI	N FL				ST-ZIP			
TITLE				DELETE	3.1 TITLE		☐ Change ☐ Add	ition	
NAME					3.2 NAME				
STREET ADDRESS						ADDRESS	:5\$		
CITY-ST-ZIP TITLE				DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	☐ Change ☐ Add	ition	
NAME			•	<u></u>	4. 2 NAME				
STREET ADDRESS						ADDRESS	iss		
CITY-ST-ZIP					4.4 CITY-5	ST-ZIP			
TITLE				DELETE	51 TITLE		Change Add	ition	
NAME					52 NAME				
STREET ADDRESS					1	ADDRESS	SS		
CITY-ST-ZIP TITLE				DELETE	5.4 CITY-S 6.1 TITLE	ST - ZIP	Change Add	ition	
NAME					6.2 NAME		L CHANGE L AQU		
STREET ADDRESS						ADDRESS	285		
CITY-ST-ZIP					6.4 CITY - S		-		
	ertify that the	e information supplied	with this filing	does not qualify			stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informat	ion	

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.