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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mertham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(5)

FILED
Mar 26 1998 8:00am
Secretary of State

LEE K	UAD TIKE CENTER, INC.				
Principal Plac	e of Business	Mailing Address			E INDENDITE DIE DESCHE FREIN ABENDE FILLE BENKT DERDE DEREK DIREK DER HEN DER HERE
% ROBERT.		% ROBERT. WEDDLE			
1325 LEE ROAD					DO NOT WRITE IN THIS SPACE
O I DANGO I	C VEUIO	OHDRINGO TE VESTO			3. Date Incorporated or Qualified
					11/30/1988
L '	Place of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-29 19822 Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	e	City & State			8. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip 24	Country	Zip	Count	ry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24]	25 9. Name and Address of Curr		30		Personal Property Tax due June 30. L. Yes L. No 10. Name and Address of New Registered Agent
10	OTT LARRY		6	1 Name	
	6 TAPPAN ZEE LN			2 Street A	Address (P.O. Box Number is Not Acceptable)
	ONGWOOD FL 32350		ľ	SHEELA	Address (F.C. Box Number is Not Acceptable)
	•		8	3	
	•		8	4 City	FL 85 Zip Code
11. Pursuant	to the pravisions of Sections 607.05	502 and 607.1508. Florida Statute	s, the abo	ve-named c	
office or r	registered agent, or both, in the Sta	te of Florida, Such change was a igations of, Section 607,0505, Flo	uthorized i	by the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	LArry Lott	7-5-			3-17-94
SIGNATURE	Signature, typed of printed name of registered a		: Registered A	gent signature re	required when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	WEODIE DODEOT O	☐ DEL ete	1.1 TITLE		Change Addition
NAME	WEDDLE, ROBERT G 1347 OLYMPIA PARK CIR		1.2 NAM	i i	
STREET ADDRESS	OCOEE FL		1	ET ADDRESS	
CITY-ST-ZIP	VPDS DELETE		2.1 TITLE	-ST-ZIP	Change Addition
NAME	A America and Amer		2.1 IIILI 2.2 NAM		
STREET ADDRESS	6 TAPPAN ZEE LN			ET ADDRESS	
CITY-ST-ZIP	LONGWOOD FL			-ST-ZIP	No.
TITLE	VP	DELETE	3.1 TITLE		Change Addition
NAME	WEDDLE, ROBERT G.		3.2 NAM	E	
STREET ADDRESS	1347 OLYMPIA PARK CIR		3.3 STRE	ET ADDRESS	
CITY-ST-ZIP	OCOEE FL		3.4. C(T)	-ST-ZIP	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAN	IE	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP	<u> </u>		4.4 CITY	-ST-ZIP	
TITLE		DELÉTE	5.1 TITLE		Change Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5.3 STRE	et address	
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAM	E	
STREET ADDRESS			1	ET ADDRESS	
CITY OF 71D	1		TO GALCITY	CT 210	'

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 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. 3-23-98 407-295-0368