## 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 # K83245

(6)

MINERAL SPRINGS, INC.

Driveino' Die e	o of Business	Mailing Address			{			
· -								
1101 SID HAYE JAY FL 32565	EŞ MU.	1101 SID HAYES RD. Jay FL 32565-9454						
US		US						
					3. Date Incorporated or Qualified		e of Last R	eport
					04/25/1989	05/0	1/1996	
2. Principal Piace of Business		2a. Mailing Address			4. FEI Number	Applied For		
21		26			59-2949257			ot Applicable
Suite, Apt	#. etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
2		27				· · ·	Fee Re	<u></u>
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23	Country	28 Zip	Co	untry	1004 107 mm-117 117 1			
Zip Gil	<del>-</del>	29	30	<i>3</i> 110 <b>y</b>	8. This corporation has liability for it Florida Statutes		ax under s No	. 199.032,
24	25   9, Name and Address of Curr		[30]		10. Name and Address of New Reg		<u> </u>	
\/E)				81 Name		,		
	DEY, ANN C 0 RUBY LANE				SAME			
	E FL 32571			82 Street Add	ress (P.O. Box Number is Not Acceptable St. D. M. R.Y.E.S. R.			
FAU	E FL 32371			83	, DID mates m	<i>)</i>		
				84 City 🦡	A &1	FL		Code
		500 - 1 007 4500 Flying Oc		31	poration submits this statement for the p tion's board of directors. I hereby accep	- FL	L_L2/	561
S-GNATURE	Signature Type: for professionance of registered	agent and tille if applicable (N AND DIRECTORS	OTE Registere	d Agent signature requi	ired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE ERS AND I	DIRECTOR	3S IN 12
Tru	D	DELETE	1.1 T	IILE		····	Change	Addition
NAME	VELDEY, ANN C.		1.2 N	AME				
STREET ADDRESS	1101 SID HAYES RD.		1.3 S	TREET ADDRESS				
CHY ST ZIP	JAY FL		1.4 0	ITY+ST-ZIP				
1111.6		DELETE	2.1 7	ITLE		l	Change	Addition
NAME			2.2 N	AME				
STIFELT ADDRESS			2.3 9	TREET ADDRESS				
CHY-ST ZIP			2. 4 (	CITY-ST-ZIP				
TITLE		DELETE	3.1 7	ITLE		[	Change	Addition
NAME			3.2 N	IAME				
STREEF ADORESS			3.3 \$	TREET ADDRESS				
CHY ST ZIF			34.1	CITY - ST - ZIP				
1111.E		☐ DELETE	4.13			į	Change	Addition
NAME			4. 2	NAME		•		
STREET ADDRESS.			4.3 \$	TREET ADDRESS				
CHY St ZIE				ITY-ST-ZIP				F=1 2 1 11
TITLE		☐ DELETE	511			į	Change	Addition
NAM:			52 N	IAME				
STREET ADDRESS			538	TREET ADDRESS				
D1Y-\$1-7#				CITY-ST-ZIP	H. MENUET.			T1
THUE		DELETE	617	ITLE			Change	Addition Addition
NAME			621	IAME				
STREET AUDRESS			6.3 5	STREET ADDRESS				
CITY-ST ZP			6.4 (	CITY-ST-ZIP				

14. Loc 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 address. ANN C. VELDEY 4/27/97 904 675-2011

**FILED** 

May 07 1997 8:00am

Secretary of State