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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K89677

(4)

DAVID B. PORTWOOD, INC.

Principal Place	e of Business	Mailing Address	Mailing Address			{	OHOR ENGIN VIOL	H WINDIN WHOM I		
1809 MOSHER DR. ORLANDO FL 32810		1809 MOSHER DR. ORLANDO FL 32810-493	1809 MOSHER DR. ORLANDO FL 32810-4839							
						3. Date Incorporated or Qualified 3a. Date of Last Report 05/22/1989 07/08/1996				
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	1 01,00	*****	plied For	
21		26	<u> </u>			59-2949342		No	t Applicable	
Suite, Apt. #, etc		Suite Apt. #, etc.	Suite Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22		27				· 1		Fee Re		
City & State 23		City & State	h			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added to		
Zip	Country	Zip	Zip Coi			8. This corporation has liability for			199.032,	
24	9. Name and Address of Curre	29	30				Yes 🗌			
	10. Name and Address of New Re	glatered Aç	ent							
PORTWOOD, DAVID B.					81 Name					
) Mosher dr. Ando fl 32810			82	Street Addre	dress (P.O. Box Number is Not Acceptable)				
0110				83					***************************************	
				84	City		FL	85 Zip (Code	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508. Florida Stat	lutes, the at	ove-	named corpo	ration submits this statement for the p		hanging it	s registered	
office or re	egistered agent, or both, in the State m familiar with, and accept the oblic	e of Florida. Such change was	s authorized	d by :	the corporation	n's board of directors. I hereby acce	t the appoi	ntment as	registered	
SIGNATURE		(A)	OTC D		t signature required		DATÉ			
Signature 1 and or printed name of registered agent and title if applicable (NOTÉ: Reg 12. OFFICERS AND DIRECTORS			13.	J Agen	t signature required	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	S IN 12	
TITLE				1.1 TITLE		7.551110110701741015170 01714		Change	Addition	
NAME	PORTWOOD, DAVID B.		1.2 NAME							
STREET ADDRESS	1609 MOSHER DR.		1.3 \$		ADDRESS					
CITY-ST-7IP	ORLANDO FL	1.4 C		TY-ST	- 21P					
TITLE		DELÉTE		2 1 TITLE				Change	Addition	
NAME			2 2 NAN							
STREET ADDRESS			2.3 STREE		DORESS				ŀ	
CITY - ST - ZIP			2 4 0	2 4 CITY-ST-ZIP						
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NAME			3.2 NAME							
STREET ADDRESS			3.3 \$1	3.3 STREET ADDRESS					ļ	
Cify - ST - ZIP			3.4 CITY-ST-ZIP		- ZIP					
TITLE			4.1 TC				L	_ Change	Addition	
NAME			4. 2 N	AME						
STREET ACCIRESS			4.3 S1	REET A	DORESS				ŀ	
CITY - ST - ZIP		I DELETE		TY-ST	- ZIP			7.0		
TITLE		☐ DELETE	5.1 TI				L	Change	☐ Addition	
NAME			5.2 N/		F P0500					
STREET ACCRESS			ı		ADDRESS					
CITY - ST - ZIP	THE THE CONTROL OF TH	DELETE		TY-ST	- ZIP		т	Change	Addition	
TITLE		ר סברנונ	6.1 TI				L	_ Unange	L. AUGILIUII	
NAME execut aborded			6.2 N/		IDDDECC.					
STREET ADORESS					ADDRESS 200					
14. I do heret	ov certify that the information supplie	ea with this filma does not au		1Y-SI exen		in Section 119.07(3)(i), Florida Statute	s I further o	ertify 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