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 # K97065

(2)

| | CITY AGENCY, INC. | 0 (2) | | | |
|---|--|--|---|--|---|
| Principal Pac | e, ed Buenasce | Mailing Address | | | |
| Principal Pince of Business % KATHERINE A. TENNEY 3150 PLACIDA ROAD GROVE CITY FL 34224 | | 3150 PLACIDA RD. 3150 PLACIDA ROAD GROVE CITY FL 34224-9 | 005 | | |
| | | US | | 3. Date Incorporated or Qualific 06/20/1989 | od 3a. Date of Last Report 04/12/1996 |
| 2. Principal Place of Business 21 | | 2a. Mailing Address 26 | | 4. FEI Number 65-0128775 | Applied For Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & Stat | ;c | City & State | | 6. Election Campaign Financing | |
| 23 Zip | Country | 28] Zip | Country | | LJ Added to Fees for intangible tax under s. 199.032, Yes □ No |
| 24 | 25 9. Name and Address of Curr | 29 ent Registered Agent | 30] | Florida Statutes 10. Name and Address of New | |
| 3150 | NEY, KATHERINE A. PLACIDA ROAD | | 81 Name 82 Street Add | dress (P.O. Box Number is Not Accer | |
| GRO | VE CITY FL 34224 | | 83 | | , |
| | | | 84 City | 78 PV-1 18 PV-1 18 PV-1 A 18 A | FL 85 Zip Code |
| 11. Pursuant office or i agent 14. SIGNATURE | To the provisions of Suctions 607.0 registered agent, or both in the Stann familiar wath, and accept the object. | ligations of, Section 607.0505, | lules, the above-named cor s authorized by the corpora Florida Statutes Off. Big stered Agent signature requ | | ne purpose of changing its registered copt the appointment as registered |
| 12. | OFFICERS A | AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OF | FICERS AND DIRECTORS IN 12 |
| 1111; f | DP | ☐ DELETE | 11 TITLE | | ☐ Change ☐ Addition |
| NAME | TENNEY, KATHERINE A. | | 1 2 NAME | | |
| STREET ADDRESS | 3150 PLACIDA ROAD | | 1.3 STREET ADDRESS | | |
| Clin Si Via | GROVE CITY FL | ☐ DELETE | 1.4 CITY- \$1-2)P | | Change Addition |
| Totale Name | | T") nercit | 2 1 TITLE : 2 2 NAME | | Lij Change Lij Addition |
| STREET ADDA (5%) | | | 2.3 STREET ADDRESS | | |
| City St 29 | | | 2 4 CITY - ST- ZIP | | |
| 191.F | | DELETE | 3 1 TITLE | | Change Addition |
| NAME | İ | | 3.2 NAME. | | |
| SHELLADORES | | | 3.3 STREET ADDRESS | | |
| CHV - \$3 - 702 | | | 34 CHY-ST-ZIP | | <u> </u> |
| TULE | | DELETE | 41 TITLE | | Change Addition |
| NAME | | | 4.2 NAME | | |
| STREET ACHORECE. | | | 4.3 STREET ADDRESS | | |
| CLANS | | D DO TIT | 44 CHY-ST-ZIP | | Diagram Addition |
| hid | | LJ DELETE | 5.1 TITLE | | Change Addition |
| NAMI | | | 52 NAME | | |
| STREET ADEMISS | | | 5.3 STREET ADDRESS | | |
| <u>Gery</u> Sty7 ≥ The | | [] DELETE | 54 CHY-ST-ZIP 61 THLE | | Change Addition |
| hatt: | | Marie Control | G 2 NAME | | Land - coorge Land Coord |
| STREET ADDRESS | | | 63 STHEET ADDRESS | | |
| CHY-St 70 | | | 6.4 CHY- ST-ZIP | | |
| | r by certify that the information supp | hed with this filing goes not au | | ed in Section 119.07(3)(i), Florida Stat | utes. I further certify that the |

information in disaffed on this animal 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 trusted in powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of chapter on an affactment with an address.

SIGNATURE

CHOSPICE OF PRINTED NAME OF SIGNING OFFICER OF BIRECTO

03/16/97 9

941-697-3150

FILED

Mar 20 1997 8:00am

Secretary of State