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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L16904

(9)

FAMILY TRADITIONS, INC.

rporation Name	L10904
SMOITIGAGE VIIM	INC

Mailing Address

FILED Mar 27 1997 8:00am Secretary of State



Principal Place of Business Mailing Address							
		710 BIRD BAY DRIVE WE VENICE FL 34292-4031	ÆST				
					3. Date Incorporated or Qualified 09/19/1989	3a. Date of La 04/11/199	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	·	Applied For
21		26 917 S. T	AMIAM	I TR	59-2971448		Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			6. Certificate of Status Desired	1 1 '	75 Additional
City & Stat	10	Cily & State U					e Required
23 28 NO		Ony of State	NOKOMIS, FL. Country		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28 NOKOMIS,	F-L	ntrv	Trust Fund Contribution		ded to Fees
24	25	29 34275	, ,		This corporation has liability for in Florida Statutes	tangible tax und Yes \[\subsetent \text{No}	16f S. 199.032,
	9, Name and Address of Cur		SA	RASOTA	10. Name and Address of New Reg		
BAK	er, fredrick a.			81 Name	AVDD IDDE		
710	BIRD BAY DRIVE WEST		ŀ	82 Street Add	BAKER, PREDERICK A dress (P.O. Box Number is Not Acceptable	al .	
VEN	ICE FL 34292				6 S.W. MARINA DR.	•)	
			Ī	0.0	· · · · · · · · · · · · · · · · · · ·		
			}	B4 City	ADIA	Terl	Zip Code
			i				24266
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	ites, the ab	ove-named cor	poration submits this statement for the pu ation's board of directors. I hereby accept	rpose of changi	ng its registered
agent La	an familiar with, and accept the ob	oligations of Section 607.0505, F	lorida Stati	r by the corpora ites.	ation's coard or directors, I hereby accept	the appointmen	it as registered
SIGNATURE	Standerick a Standard or product warms of registered	Baker				3-22-	97
12,				Agent signature requ	uired when reinstalling)	DATE	
TITLE	OFFICERS /	AND DIRECTORS DELETE	13.	· r	ADDITIONS/CHANGES TO OFFICE		
NAME	VOWELL, ROBIN	L_ statest		LC	SECRETARY/TREASURE	Cha	nge L Addition
STREET ADDRESS	420 PALM CREEK DR		1.2 NA		DECKLIARI/IREASURE	ĸ	
City-St-ZiP	ENGLEWOOD FL			REET ADDRESS			
TILE	ST	DELETE	2.1 TIT	Y-ST-ZIP		☐ Cha	nge Addition
NAME	BAKER, GLENN	X , ******	2.2 NA			Cha	inge Em Addition i
STREET ADDRESS	9646 S.W. MARINA DR			IEET ADDRESS			
CHY-ST-ZIP	ARCAIDA FL			IY-ST-ZIP			ı
101.F	VP	DELETE	3 1 TIT			Cha	nge Addition
NAME	VOWELL, WAYNE	A	3 2 NA				
STREET ADDRESS	420 PALM CREEK DR.		1	NEET ADDRESS			
CHY-SI-7P	ENGLEWOOD FL			Y-ST-ZIP			
TILE	Č	☐ DELETE	41 111		DODGED NUC	Cha	nge Addition
NAME	BAKER, FREDERICK		4.2 NA	ME	PRESIDENT		
STREET ADDRESS	710 BIRD BAY DR., W		4.3 STF	REET ADDRESS	0646 C M MARTON -	•	
CITY-ST-ZIP	VENICE FL		4.4 CIT	Y-ST-ZIP	9646 S.W. MARINA D	ĸ.	
THILE		☐ DELETE	5.1 TIT	Æ	ARCADIA, FL. 3426	6 Cha	nge 🔲 Addition
NAMŁ			5.2 NA	ME			
STREET ADDRESS			5 3 STA	EEF ADDRESS			
CITY - S* - ZIP			5 4 CIT	Y-ST-ZIP			
THTEF		DELETE	6 1 TIT	.E		Chai	nge 🔲 Addition
NAME			6.2 NA	AE			
STREET ADDRESS			6.3 STR	EET AODRESS			
City - ST - ZiP				Y-ST-ZIP			
16. Ldo berek	ny corbby that the information curre	tigat with this films along not aust	itu for tha r	wantan atata	d in Section 110 07/2)(i) Florida Statutos	1 de cable a a markit .	Al- a k Al- a

Too indexy comy that the information supplied with this liting does not quality for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report as required on this 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 altechment with an address.

FRENCHICK A. BAKER 3-22-97