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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L51828

(6)

MATLACHA ENTERPRISES, INC.

FILED Jan 24 1997 8:00am Secretary of State

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25 28 30 10 10 Name and Address of Current Registered Agent 10 Name and Address of New Registered Agent 10 Name and Address 10 Name and Address of New Registered Agent 10 Name and Address 10		Country	Zip		Countr	y	8. This corporation has liability for	intangible tax	under s	. 199.032,
STUTION, SHELDON S. 2898 TRIGGER RISH MATLACHA FL 33909	4	25	29		30		Florida Statutes	Yes 🔲 N	0	
11. Pursuant to the prosessors of Sections 8(7) 05.02 and 807 tib98. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of Section of Sections 8(7) 05.02 and 807 tib98. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere of Section of Section of Section 807 05.05, Florida Statutes. 11. Pursuant to the prosessors of Sections 8(7) 05.02 and 807 tib98. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere of section and purpose of change is a submit of the corporation's board of directors. I thereby accept the approximent as registere section and purpose of change is submitted to corporation's board of directors. I thereby accept the approximent as registere section and purpose of change is registered section. 12.		9. Name and Address of Curr	ent Registered Age	ent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered Age	nt	
MATLACHA FL 33909	FULT	on, sheldon s.			81	Name				
NATLACHA FL 33909	2898	TRIGGER FISH			82	Street Ado	fress (P.O. Box Number is Not Acceptal	ole)		
11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register officing or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere significant materials with, and accept the corporation of Socions 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registere significant with, and accept the corporation of board of directors. I hereby accept the appointment as registere significant with, and accept the corporation of Socions 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registere significant with, and accept the corporation of statutes of the deposition of th	MATL	ACHA FL 33909			-	50017100	Toda (170, Box Harrison to Hot Prooping	5107		
1. Pursuant to the previsions of Socious 607.0502 and 607.0508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent of notify in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent of an internation with, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNAT Juli 2.					83					
1. Pursuant to the previsions of Socious 607.0502 and 607.0508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent of notify in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registere agent of an internation with, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNAT Juli 2.					9/	Cety]0	E Zip	Code
11. Pursuant to the previousions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation's board of directors. I the purpose of changing its register agent. I arm familiar with, and accept the obligations of, Section 607 0506, Florida Statutes. SIGNATURE					107	City		FL °	a Zip	COOR
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THE	Sidianione	ilgeneture. Egyed ar printed name of registeres (agent and (No Lappycabit	(NOTE	Registered Ag	ent signature requ	uired when reinstating)	DATE		
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14. I do 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.

SIGNATURE: SHELDON S FULTON

ER OR DIRECTOR 1 Tulton A. 1/17/97 94/1-283-5722