FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # L65753 (0)

SOUTHERN CLASSIC DEVELOPMENT, INC.

FILED Mar 02 1998 8:00am Secretary of State

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Principal Place of Business		Mailing Address			L SOBILBIT ALE ALIBI DINET HORDI MITAN HITI ANDLI MINIT	
317 BRANTLEY CLUB PLACE LONGWOOD FL 32779 US		317 BRANTLEY CLUB PLACE				
		LONGWOOD FL 32779 US			DO NOT WRITE IN THIS SPACE	
		00			3. Date Incorporated or Qualified 04/11/1990	0 017102
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3002508	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional	
22 City R Stat		[27]				Fee Required
City & State		Gily & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current		1331		10. Name and Address of New Registere	d Agent
PE	RONTI, MICHAEL J.		81	Name		
317 BRANTLEY CLUB PLACE			82 Street Ac		dress (P.O. Box Number is Not Acceptable)	
lo	NGWOOD FL 32779		L			
			83			
			84	City	The state of the s	85 Zip Code
				'	F	
office or r agent. La SIGNATURE	registered agont, or both, in the State irn familiar with, and accept the obliga	of Florida, Such change was from of, Section 607,0505, Fr	authorized by orida Statute	y the corpora s.	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap-	opointment as registered
	Signature, typed or printed native of registered ages	1 T T NOTE AND 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	L Registered Ag	ent signature requ	ired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AF	
TITLE	D DATE OF THE PARTY OF THE PART	DELFTE	1.1 TITLE			Change Addition
NAME	BRADICK, RAYMOND R.		1.2 NAME			
STREET ADDRESS	3524 HOLLIDAY AVE.		1.3 STREET	AODRESS		
CITY-ST-ZIP	APOPKA FL	- Partie	1.4 CITY - 5	ST - ZIP	V-10-10-10-10-10-10-10-10-10-10-10-10-10-	
TOTLE	D DEDONITE MONTHE A	DELETE	2.1 TITLE			Change Addition
NAME	PFRONTI, MICHAEL J.		2.2 NAME			
STREET ADDRESS	317 BRANTLEY CLUB PLACE		2.3 STREET			
CITY-ST-ZIP	LONGWOOD FL.	T BELEVE	2. 4 CITY~	ST · ZIP		
TITLE	CHRISTIANSEN, ROBERT	DELETE	3.1 TITLE			Change Addition
NAME	2018 HIDDEN PINE LANE		3.2 NAME			
STREET ADORESS	APOPKA FL		3 3 STREET			
CITY-ST-ZIP TITLE	A VENA FL	DELETE	34 CITY-	ST-ZIP		Change Addition
NAME 1		C) percet	4.1 TITLE			L Change L Addition
			4. 2 NAME			
STREET ADDRESS			4.3 STREFT			
CITY-S1-ZIP TITLE		DELETE	44 CITY-S 51 TITLE	it - ZIP		Change Addition
NAME		_ otten	5.2 NAME			The Property of
STREET ADDRESS				ADDOLOG		
			5 3 STREET			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S 6.1 TITLE	51 - Z(P		Change Addition
NAME			6.2 NAME		•	The Property of the Property o
STREET ADDRESS			6.3 STREET	ADDRESS	- 	
					•	
CITY-ST-ZIP			6.4 City-S	31-70P F		

14. I 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 chapters or on an attachment with an address.

SIGNATURE: