

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L65826** (4)

1. Corporation Name

LIVELY ENTERPRISES, INC.



Principal Place of Business

% ALTON J. LIVELY
2470 LOTAFUN DR.
WINTER PARK FL 32789

Mailing Address

% ALTON J. LIVELY
2470 LOTAFUN DR.
WINTER PARK FL 32789

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

LIVELY, ALTON J.
2470 LOTAFUN DR.
WINTER PARK FL 32789

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person printed to be of principal agent and the corporation

Signature of Registered Agent Signature of corporation representative

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	LIVELY, ALTON J.	
STREET ADDRESS	2470 LOTAFUN DR	
CITY-STATE-ZIP	WINTER PARK FL	
TITLE	D	☐ DELETE
NAME	LIVELY, BETTY J.	
STREET ADDRESS	2470 LOTAFUN DR	
CITY-STATE-ZIP	WINTER PARK FL	
TITLE	D	☐ DELETE
NAME	LIVELY, DAVID	
STREET ADDRESS	2470 LOTAFUN DR	
CITY-STATE-ZIP	WINTER PARK FL	
TITLE	D	☐ DELETE
NAME	WOLFE, KAREN	
STREET ADDRESS	2470 LOTAFUN DR	
CITY-STATE-ZIP	WINTER PARK FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 NAME	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 NAME	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 NAME	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 NAME	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 NAME	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 NAME	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Alton J. Lively
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-96

805
872-2443
Corporate Number

CR2E034 (12/95)