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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L76766

(9)

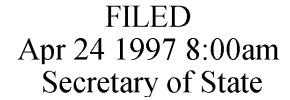
ALLEN PROPERTY MANAGEMENT SERVICES, INC.

Principal Place of Business

Mailing Address

120 W LUTZ LAKE FERN RD

P.O. BOX 274210





US		US						
					3. Date Incorporated or Qualified 05/31/1990	Sa. Date of Last Report 05/01/1996		
	lace of Business	2a. Mailing Address	4		4. FEI Number		A	oplied For
21/02/			27421	Q	59-3025676		No.	ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State 23 Lutz	FL	City & State 28 TAMOA	FL		Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zıp	Country •	. /	8. This corporation has liability for in		x under s	
24 3354	9. Name and Address of Current		10 Hills bu	747 <u>-</u>	Florida Statutes 10. Name and Address of New Rec	Yes 🔲		
A115	// / / / / / / / / / / / / / / / / / /	uadistatan Mailit	81 Nar	•	10, Name and Address of New Reg	listeled Võ	- OIL	
	EN, DAN							
	W LUTZ LAKE FERN ROAD WEST		82 Stre	et Addre	ss (P.O. Box Number is Not Acceptabl	le)		
IAM	PA FL 33618							
			63					
			84 City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida Statutes	, the above-nam	ed corpo	pration submits this statement for the pr	irnose of c	hanaina i	ts registered
office or r	registered agent, or both, in the State o im familiar with, and accept the obligati	f Florida. Such change was au	thorized by the c	orporatio	on's board of directors. I hereby accep	t the appoir	itment as	registered
SIGNATURE	Stip alone, typed or per litid name of registered agent	and title Lappicable. (NOTE:	Registered Agent signs	ture required	d when reinstating)	DATE	····	-
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	PECTOR	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE				Change	RS IN 12 Addition
NAME	ALLEN, DAN		1.2 NAME					
STREET AODRESS	120 LUTZ LAKE FERN ROAD WE	ST	1.3 STREET ADDRES	is l				
City-St Ze	LUTS FL		1.4 CITY - ST - ZIP					
TITLE	VP	DELETE	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAML	BATES-ALLEN, SUSAN		2.2 NAME					_
STREET ADDRESS	120 W LUTZ LAKE FERN RD		2.3 STREET ADDRE	:				
CITY-ST-ZIP	LUTZ FL 33549		2. 4 CITY - ST - ZIP	~				
11/LF	2972 1 2 300 10	DELETE	3.1 TITLE				Change	Addition
NAME		WEER'E	3.2 NAME			L	a change	Figure 1
STREET ADDRESS				.				
			3.3 STREET ADDRES	··				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		***		Change	Aptillion
		□ DELETE	4.1 TITLE			I,	Change	Addition
NAME			4. 2 NAME					
STHEET ADDRESS			4.3 STREET ADDRES	i5				
Crty - ST - ZiP	· · · · · · · · · · · · · · · · · · ·	ne eve	4.4 CiTY-ST-ZIP				1 2	
TITLE		☐ DELETE	5.1 TITLE			L] Change	L Addition
NAME			5.2 NAME		•			1
STREET ADDRESS			5.3 STREET ADDRES	s				1
CITY - S* - ZIP			5.4 CITY - ST - 7#P					
TI*LE		☐ DELETE	6.1 TITLE	1			Change	Addition
NAME			6.2 NAME	i	•			1
STREET ADDRESS			6.3 STREET ADDRES	is				1
CHTY+S1+7IP			6.4 CITY-S1-ZIP					1
CHI 1 01 1 1 1			■ 0.4 OH (*31-21F					

I do hereby certify that the information supplied with this filling 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 good 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 co-forcing on 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 is chapted or on an attachment with an address.

SIGNATURE:

PILOUSUSAN BATESAILON 4/11/97