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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 01 1998 8:00am Secretary of State

1. Corporation		L9675	(-)				*18*1
Principal Place of Business Mailing Address							/
1208-B BELL SHOALS RD. BRANDON FL 33511 US			POST OFFICE BOX 82 VALRICO FL 33594-08	POST OFFICE BOX 828 VALRICO FL 33594-0628 US		DO NOT WRITE IN TH	HIS SPACE
00			00			3. Date Incorporated or Qualified 08/27/1990	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
1			26		59-2712852	Not Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	<u></u>	City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25		29 33595-0 828 30 C		y	This corporation owes or has paid the Personal Property Tax due June 30.	
		d Address of Curre	nt Registered Agent			10. Name and Address of New Register	
HA	MPTON, DOUG	GLAS W.		81	Name		
205 N. PARSONS AVENUE				82	Street Ado	Address (P.O. Box Number is Not Acceptable)	
BRANDON FL 33510							
				63	1		•
					City		85 Zip Code
44 Durewant	to the provinces	of Sections 607 050	12 and 607 1609 Florida Sta	atutor the show	re-pamod cor		
office or agent. I a	registered agent am familiar with,	, or both, in the State and accept the oblig	e of Fiorida. Such change wa ations of, Section 607.0505,	as authorized b Florida Statute	y the corpora	poration submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE	Signature, typed or o	ninted name of registered ag	ent and ette it applicable (I	NOTE: Registered Ap	ent signature requ	lred when reinstaling) DAT	E
12.			D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PT		DELETE	1.1 TITLE			Change Addition
NAME	HAUNSTETTER, FRANCIS			1.2 NAME			
STREET ADDRESS	1 10001 #11412011 02121		STE 155	1.3 STREE	T ADDRESS		
CITY-ST-ZIP	BRANDON	<u>FL</u>		1.4 CITY-	ST-ZIP	····	
TITLE	V		☐ DELETE	2.1 TITLE			Change Addition
NAME	HAUNSTETTER, JR F X		NTP 400	2.2 NAME			
STREET ADDRESS 1335F BRANDON BLVD, W, STE			SIE 100		T ADDRESS		
CITY-ST-ZIP TITLE	BRANDON S	<u>FL</u>	DELETE	2. 4 CITY - 3.1 TITLE	SI-ZIP		Change Addition
NAME	_	ter, denise m.	otter	3.1 HILE	ļ		Zin Autorita
STREET ADDRESS		NDON BLVD. W.,	SUITE 155		T ADDRESS		
CITY-ST-ZIP	BRANDON		4411F 144	3.4 CITY-			
TITLE	<u> </u>	· 	DELETE	4.1 TITLE			Change Addition
NAME				4. 2 NAME	.		
STREET ADDRESS				4.3 STREE	t address		
CITY-ST-ZIP				4.4 CITY -	ST-ZIP		
TITLE		_	DELETE	5.1 TITLE			Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREE	T ADDRESS		
CITY - ST - ZIP			T DEL CET	5.4 CITY-	ST-ZIP		[] [Al
TITLE			☐ DEL€1E	6.1 TITLE			☐ Change ☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				·	I ADDRESS		
CITY-ST-ZIP	1			6.4 CITY -	T-ZIP		

14. Thereby 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.