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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

M69235

(3)

DOCUMENT # 1. Corporation Name

GLEN ESTE CORPORATION

Principal Place of Business

Mailing Address

C/O RALPH C. SARGENT 1300 U.S. 27 NORTH HAINES CITY FL 33844

C/O RALPH C. SARGENT 1300 U.S. 27 NORTH HAINES CITY FL 33844



					3. Date Incorporated 02/17/1988	or Qualified	3a. Date of Las 08/10/	1995
. '-	ce of Business 7 <i>V.</i> 5. 27 <i>N</i> .	2a. Mailing Address	4 -		4. FEI Number 59-2893180)	-	Applied For Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.			5. Certificate of Status	s Desired		75 Additional se Required
City & State	es City, FL	City & State			6. Election Campaign Trust Fund Contrib	_	1 1	.00 May Be ided to Fees
738°	44 25 Polk	Zip 29	Countr 30	y 	8. This corporation ha Florida Statutes	☐ Yes	□No	rs 199.032,
	9. Name and Address of Current	Registered Agent		T 41	10. Name and Addre	ss of New Ro	egistered Agent	
SARGEN	T RAIDH C		81	Name 3	John S. Ke	inck	C	
SARGENT, RALPH C. 616 PENINSULA DR. HAINES CITY FL 33844				Street Address (P.O. Box Number is Not Acceptable)				
HAINES	CIT FL 33844		83	1				
			84	City Hai	nes City		FL 85	Zip Code
1. Pursuant to	the provisions of Sections 607,0502 and appet or both in the State of Florida	and 607.1508, Florida Sta	tutes, the above	named corpor	ation submits this statemen	nt for the purp	pose of changing i	ts registered offic
familiar witi	d agent, or both in the State of Florida n, and accept the Johnstons of Juicio	n 607,9505 7 lorida Statu	onzed by the corp ites.	coration's boar	ra of directors. I hereby acc	cept the appo	entment as registe	red agent. I am
GNATURE ,	11 15.	Kennelo	To	ba S. 1	Ceineke	V.P.	1-22	-76
	Support or printed harrie of registered agent at OFFICERS AND	d trie if applicable	(NOTe: Registered Age	nt signature required		DED TO OFF	DATE	TODO IN 10
	OFFICENS AND	DIRECTORS	13.		ADULTIONS/CHANG	JES TO OFFIC	CERS AND DIREC	TORS IN 12
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oath; that I am an officer or director of the corporation or the receivappears in Block 12 or Block 13 if changed, or on an attachment y

SIGNATURE:

John S. Reineke