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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M83342

(9)

PENNY CORP.

Principal	Place of	Business
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Mailing Address

FILED
May 28 1997 8:00am
Secretary of State



10501 Branchton Church RD Thonotassasa FL 33592 US	10501 Branchton Church Thonotassasa FL 33592-2 US				
			3. Date Incorporated or Qualified 05/31/1988	3a. Date of Last R 03/26/1996	toport
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	A	plied For
21 12001 CORY LAKE BLVD	. 26 12001 CDRY L	AKE BLVD.	59-2898450	N	ot Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 Fee Re	Additional equired
City & State 23 TAMPA FL.	City & State 28 TAMPA, FL.		Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip Country 28 US	Zip 29 33647 3	Country 0 US		Yes No	. 199.032,
9. Name and Address of Cui	rrent Registered Agent		10. Name and Address of New Reg	gistered Agent	
thomason, gene		81 Name			į
10501 BRANCHTON CHURCH RI THONOTASSASA FL 33592	D		ddress (P.O. Box Number is Not Acceptab 2001 CORY LAKE BLVD	le)	
•		84 City	AMPA	FL 85 Zip	47
 Pursuant to the provisions of Sections 607, office or registered agent, or both, in the Si agent. I am familiar with, and accept the of 	0502 and 607,1508, Florida Statutes tate of Florida. Such change was aut bligations of, Section 607,0505, Florid	, the above-named c horized by the corpo da Statutes.	corporation submits this statement for the protection's board of directors. I hereby accept	urpose of changing it t the appointment as	s registered registered
SIGNATURE					
Signature, typed or printed name of registered	d agent and tille if applicable (NOTE F AND DIRECTORS	Registered Agent signature r	equired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	ic IN 12
12. OFFICERS	DELETE	1,1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change	S IN 12
NAME KEEN, MARCY	_ office	1.2 NAME		onsinge	
STREET ADDRESS 10501 BRANCHTON CHUR	ICH R	1.3 STREET ADDRESS	10001 0000 1 000 00		
CITY-ST-ZIP THONOTASSASA FL		14 City-St-Zip	12001 CORY LAKE BLVD. TAMPA, FL 33647		
TITLE	☐ DELETE	21 TITLE	THMEN, FL 32047	Change	Addition
NAME		2.2 NAME		_	\ \ \
STREET ADDRESS		2.3 STREET ADDRESS			ļ
CITY-ST-ZIP		2.4 CITY-ST-7IP			
TITLE	☐ DELETE	3.1 TITLE		Change	Addition
NAME		3.2 NAME			l
STREET ADDRESS		3 3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY - ST - ZIP			
TITLE	☐ DELETE	4.1 TOLE		☐ Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP	Driese	4.4 CITY-ST-ZIP		TT ch	I Addition
TITLE	L DELETÉ	5.1 TITLE		L Change	Addition
NAME		52 NAME			1 1
STREET ADDRESS	•	5.3 STREET ADDRESS		(7)7 <	178107
CITY-ST-ZIP TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Channe	Addition
			4000 <u>0</u> 220	4044	_
NAME Street address		6.2 NAME 6.3 STREET ADDRESS	40000220 -06/06/970104 ***903.75	4044 18006	

14. I do 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 changed, or on an attachment with an address.

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