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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # M86532

(2)

NEIGHBORHOOD RENOVATION CORPORATION

FILED Jan 27 1997 8:00am Secretary of State

•	e of Business	Mailing Address					1111 1111 1111 1111 1111 1111	
151 VARIETY TREE CIRCLE 151 VARIETY TREE CIR ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS				34				
					3. Date Incorporated or C		ate of Last Re	eport
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number			oplied For
21		26			NOT APPLICAB	LE		ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status De	sired 🔲	\$8.75 / Fee Re	
City & Stat	le	City & State	·····		6. Election Campaign Fina	ancing	\$5.00	May Be
23		28			Trust Fund Contribution		Added t	
Žip			Cou	ntry		This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
24	25 9. Name and Address of Curro	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of			
140	CHT, HERBERT A.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	81 Name				
	1 VARIETY TREE CIRCLE			82 Street	Address (P.O. Box Number is Not	Acceptable)		
	TAMONTE SPRINGS FL 32714		1		Total Door, I tall Door, I tall	, 1020,710010,		
				83				
				84 City	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607 05 registered agent, or both, in the Sta	502 and 607 1508. Florida Statu	ites the a	ove-name	corporation submits this statemen		f changing it	s registered
office or agent. La SIGNATURE	registered agent, or both, in the Sta am familiar with, and accept the obl Signature typed or protect mane of registered a	igations of Section 607.0505, F	lorida Sta	utes.	rporation's board of directors. I here	DATE	ointment as	registered
12.		IND DIFFECTORS	13,		ADDITIONS/CHANGES		DIRECTOR	RS IN 12
TITLE	В	DOLOTE		0.5	T		Change	Addition
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NAME	LICHT, HERBERT A.	["] Detest	1.1 TJ 1.2 N					L Audillion
NAME Street address	LICHT, HERBERT A. 151 VARIETY TREE CIRCLE	[_] Dett#t	1.2 N				CT Change	Manipul
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14. To hereby certify that the information supplied with this filing does not quality 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 Chapter 6, or on an attach left with an address.

SIGNATURE:

PURE AND TYPED OR PRINTER WARREST SIGNING OFFICER OR DIRECT

1/16/97 Date 807-862-0408

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