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

## CORPORATION

FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT  1997			Secretary of State DIVISION OF CORPORATIONS			Secretary of State					
1. Corporatio	MENT # M860 TORAGE, INC.	646	(0)				I MAIRAN ITI IANA ANIE ANEE ENGIA ANI	Arfin Ailin A	idli aidse Eidii	Bigii (AB)	
Principal Place %JANET COX 684 MONTROS CLERMONT FL		%JANET C 884 MONT	Mailing Address %JANET COX 684 MONTROSE STREET CLERMONT FL 34711-2120								
2 Principal f	flace of Business	2a Mailin	g Address			···	3. Date Incorporated or Qualified 06/23/1988 4. FEI Number		ate of Last R <b>)5/1996</b>		
21	Take of Edd-Telog	26	ig nadioss				59-2446595		<del>- </del>	oplied For ot Applicable	1
Suite, Apt.	#, etc.	Suite.	Apt. #, etc.	<del></del>		,	5. Certificate of Status Desired		\$8.75	Additional equired	
City & Sta	te	27 City 8	State	n_		<del>,</del>	6. Election Campaign Financing	- <del></del>		May Be	1
<b>23</b> [ Z(p)	Country	<b>28</b>		T 60	intry		Trust Fund Contribution		bebbA	to Fees	4
24				30	iritry		8. This corporation has liability for intanglible tax under s. 199.032. Florida Statutes X Yes No				
	9. Name and Address of	·	Agent	17.74			10. Name and Address of New Re	distored	Agent		1
	(, JANET				81	Name					
684 MONTROSE STREET CLERMONT FL 34177					82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	<del></del>		1
ULE	HMUNI FL 341//				83						-
								·	<del></del>		_[
					84	City		FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 6	07.0502 and 607.150	8, Florida Statu	tes, the a	pove	named corp	poration submits this statement for the p	urpose of	changing i	is registered	1
agent La	registered agent, or both, in the am familiar with, and accept the	e obligations of, Secti	on 607.0505, Fi	authorize orida Stat	a by lutes.	tne corpora	poration submits this statement for the p tion's board of directors. I hereby accep	it ine app	ointment as	registered	
SIGNATURE	Bi		4101	f. D					··		
12.	Signature, typed or printed name of regis OFFICE	RS AND DIRECTORS		13.	d Agen	i signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND	DIRECTOR	3S IN 12	16
11116	] <b>D</b>		DELETE	1.1 TI	TLE			<u></u>	Change	Addition	18
N4MÉ	ROCKER, JOHN			1.2 N	AME						12
STREET ADDRESS	320 E. LAKESHORE DRI	VE		1.3 S	TREET A	address					Š
COY-ST-ZIP	CLERMONT FL		Decree		TY-ST	· ZIP		<del></del> .,	T 3		_ §
TIFE	ROCKER, MARY		DELETE	211		}			Change	Addition	1
NAME STREET ADDRESS	320 E. LAKESHORE DRI	VE		22 N/		LDDRESS	C.F.				1
City-St-ZiP	CLERMONT FL	•-		- 1	ITY-ST						
THE	D		DELETE	3.1 11					Change	Addition	1
NAME.	CORNELL, DANE R.			3.2 N	AME						
STREET ADDRESS	1922 BRANTLEY CIRCLE			3.3 \$1	reet #	address					
CITY-ST-7P	CLERMONT FL.		DELETE		ITY-ST	- ZIP	***************************************		7-12.	17400	1
TITLE NAME	CORNELL, JUDY		בן טנננונ	4.1 TI 4. 2 N					Change	☐ Addition	
STREET ADDRESS	1922 BRANTLEY CIRCLE					LODRESS					1
CITY-ST-ZIF	CLERMONT FL				TY-ST	- (					1
TILE			DELETE	5.1 TI		<del></del>			Change	Addition	1
NAME				52 N	AME	)					1
STREET ADDRESS				1		DORESS					
CHY-S1-ZIF			DELETE		TY-\$1	- ZIP			Change	Asian-	-{
TITLE			FT OCTES	6.1 TI 6.2 N/		1			L. Unange	Addition	
STREET ADDRESS	}					DDRESS					1
CITY SI - 7iP				1	IY-ST	i					

14. It 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.

**FILED** 

Apr 23 1997 8:00am

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