

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

FILED
May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M89040
1. Corporation Name

CITBELT INVESTMENTS, INC.

Principal Place of Business 390 N. ORANGE AVE, SUITE 1100 ORLANDO, FL 32801 US	Mailing Address 390 N. ORANGE AVE SUITE 1100 ORLANDO, FL 32801 US
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3. Date Incorporated or Qualified 07/11/1988	3a. Date of Last Report 03/21/96
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2. Principal Place of Business 21 111 NORTH ORANGE AVENUE Suite, Apt. #, etc. 22 SUITE 2050 City & State 23 ORLANDO, FLORIDA Zip 24 32801	2a. Mailing Address 25 111 NORTH ORANGE AVENUE Suite, Apt. #, etc. 27 SUITE 2050 City & State 28 ORLANDO, FLORIDA Zip 29 32801	Country 26 USA Country 30 USA
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4. FEI Number 59-2910066	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

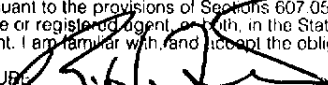
9. Name and Address of Current Registered Agent

B & C CORPORATE SERVICES OF CENTRAL FLA.
390 N. ORANGE AVE
SUITE 1100
ORLANDO, FL 32801

10. Name and Address of New Registered Agent

81 Name RANDOLPH H. FIELDS
82 Street Address (P.O. Box Number is Not Acceptable) 111 NORTH ORANGE AVENUE
83 SUITE 2050
84 City ORLANDO
85 FL
Zip Code 32801

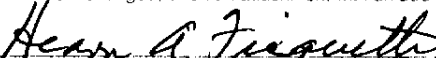
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:  RANDOLPH H. FIELDS 04/29/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS FICQUETTE, HARRY S. 145 LAKE MARIAM RD. WINTER HAVEN, FL ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PTD FICQUETTE, HEARN A. 1473 KELSO BLVD. WINDERMERE FL 34786 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VP FICQUETTE, RICHARD 6101 PIER PLACE DR. LAKELAND, FL 33814 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	DS FICQUETTE, JOHN D. 8750 LAKE HANCOCK ROAD WINTER GARDEN, FL 34787 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE:



H.A. FICQUETTE

04/29/97 (407) 656-3106

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)