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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # M94331

(9)

S & H RODGERS ENTERPRISES, INC.

FILED Apr 22 1997 8:00am Secretary of State

Principa: Place of Business \$ STANLEY W. RODGERS 145 EAST GRANADA BLVD. ORMOND BEACH FL 32176 2. Principal Place of Business 21 Suite. Apt. #, etc.		Mailing Address STANLEY W. RODGERS 145 EAST GRANADA BLVD. ORMOND BEACH FL 32176-8683 2a. Mailing Address 2b. Suite, Apt. #, etc.			4. FEI Number Applied For NOT APPLICABLE Not Applicable	
22	(n ₁ ()(()	27		5. Certificate of Status Desired	Fee Required	
City & Sta	ate:	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
2 3] Zgi	Country	Zip	Country		for intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes	Yes No	
	Name and Address of Current	nt Registered Agent		10. Name and Address of New	Registered Agent	
ROI	DGERS, STANLEY W.		81 Nar	ne		
145 EAST GRANADA BLVD.			82 Stre	82 Street Address (P.O. Box Number is Not Acceptable)		
QRI	MOND BEACH FL 32176		83	· · · · · · · · · · · · · · · · · · ·		
			84 City		FL 85 Zip Code	
SIGNATURE 12. Title	Signatific, lyased or printed nation of registered age OFFICERS AN	on: and title if applicates D. DIRECTORS DELETE	NOTE Registered Agent signs 13. 1.1 TITLE	ADDITIONS/CHANGES TO OF	B-4-9 7 DATE FICERS AND DIRECTORS IN 12 Change Additio	
NAME STREET ADDRESS	1		1.2 NAME 1.3 STREET ADDRE	ese		
CIY-ST-ZiP Title	ORMOND BEACH FL ST	DELETE	1.4 CITY~ST~ZIP 2.1 TITLE		Change Additio	
NAV:	RODGERS, HARRIETT J.	C Decent	2.2 NAME		Em) bridge Em) ridgios	
STREET ADDRESS			23 STREET ADDRE	ss		
CHY - ST - ZIP	ORMOND BEACH FL		2. 4 CITY - \$1-ZIP	with the continues of t	A ***	
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NAME			32 NAME			
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NAME		E.J Beiere	4. 2 NAME		CIII Orderigo CIII Addition	
STREET ADORESS	; <u> </u>		4.3 STREET ADDRE	ss		
CHY-ST-ZIP			4.4 CITY-ST-ZIP		4	
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NAME			5.2 NAME		//k/// da	
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NAME			6.2 NAME	3000021 -04/24/9701	.006024	
STREET ADDRESS	8		6.3 STREET ADDRE	ss ***165.00	· = = - · · · · · · · · · · · · · · · ·	
C 1Y - S1 - ZIP			6.4 CiTY - ST - 21P			

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 changedy or on an attachment with an address.

SIGNATURE: