## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

N47999

(0)

AMERICAN	MINIATURE	TRATTERS	MOITAIOO224	INIC

Principal Place of Businoss Mailing Address						I ABBINION BIL &IANI ABBIN YANTA IBIID			
P. O. BOX 613 P. O. BOX 613 CITRA FL 32133 CITRA FL 32133 US US									
						3. Date Incorporated or Qualified 03/23/1992	3a. Date of Las 04/12/		
Principal Place of Business     The Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For		
Suite, Apt.	#, etc.		<del></del>			59-3114445		Not Applicable	
22		27				5. Certificate of Status Desired	1 1 7 7	5 Additional Required	
		City & State	& State			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for in		·· · · · · · · · · · · · · · · · · · ·	
24	25	29			Florida Statutes 🔲 Yes 🛣 No				
	9. Name and Address of C	urrent Registered Agent		81	News	10. Name and Address of New Re	gistered Agent		
DALL D	ORENT		}	<b>°</b> '	Name				
BALL, R 17126 N	NE 36TH COURT		•	62	Street	t Address (P.O. Box Number is Not Acceptable)			
	L 32113			83					
			}	84	City		B5 Z	ip Code	
11. Pursuant t	to the provisions of Sections 617	.0502 and 617.1508, Florida Statut	es, the abov	/e-pa	amed co	rporation submits this statement for the purp	FL S	registered office	
or registere familiar wit	ed agent, or both, in the State of th, andvaccoot the obligations of,	f Florida. Such change was authoriz Section 617.0503. Florida Statutes	ed by the c	orpo	ration's	poration submits this statement for the purportioard of directors. I hereby accept the appoin	ntment as registere	d agent. I am	
SIGNATURE 4		Robert E	. Bal	1			2/96		
12.		S AND DIRECTORS	13.	- GC-II	s-g-initi-te-te	ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECT	ORS IN 12	
TITLE	PD	☐ DELETE	1.1 717	LE			Change	Addition	
NAME	MORRIS, HOWARD M.		1.2 NA	ME			<u> </u>		
STREET ADDRESS	RT. 1 BOX 1725		1.3 STA	EE1 A	DORESS				
CITY-ST-ZIP	ANTHONY FL		1.4 CIT	y - S1 -	- ZIP				
TITLE	STD	DELETE	2 1 111	.F		SD	<b>∑</b> Change	☐ Addition	
NAME	Ball, Zondara K		2.2 NAI	ΜE					
STREET ADDRESS	17126 NE 36TH CT		23 STF	EET A	DDRESS			:	
CITY-ST-ZIP	CITRA FL		2 4 01	Y-SI	- 7/P				
TITLE	MD	DELETE	3.1 TITI	Ę.			Change	Addition	
NAME	BALL, ROBERT E		3 2 NA	ΛE				ŀ	
STREET ADDRESS	17126 NE 36TH CT.		3 3 STF	IA 133	DDRESS				
CITY-ST-ZIP TITLE	CITRA FL	<b>K</b> elocicae	3.4 CIT		- ŽIP				
NAME	•	<b>⊠</b> DELETE	4.1 TITL			TD	🔀 Change	☐ Addition	
	WILLIAM, HOWE 5811 NW NETH PL		4 2 NA		1	Eileen Gauck			
STREET ADDRESS CITY-S1-ZIP	OCALA FL				DDRESS	13841 NE. 38th Ave	-		
TITLE	VD	DELETE	4.4 C/T		ZIP	Anthony, Fl. 32617			
NAME	RIVERS, PATTI	<b>K</b> IOLU IL				VD .	🔀 Change	☐ Addition	
STREET ADDRESS	17226 NE NE 9TH AVE		5 2 NAA		DODE CO	Gerry Morris			
CITY-ST-ZIP	CITRA FL		5.3 STR 5.4 CITY			RT. 1 Box 1725			
TITLE		DELETE	6 1 TiTu		LIF	Anthony, F1. 32617	Change	Addition	
NAME			6 2 NAN				☐ Change	☐ ¥90HQH	
STREET ADDRESS			63 STR		DUBEGG				
CITY-ST-ZIP			6.4 CITY					ļ	
	certify that the information supp	lied with this filing is voluntarily furni annual report or supplemental annu	shed and d	oes r	not quali	fy for the exemption stated in Section 119.07	(3)(k) Florida Statut	on I further	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: Robert E. Ball 4/2/96 352-595-3372