## **FILE NOW: FILING FEE IS \$61.25**

Jun 17 1997 8:00am NONPROFIT ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # (3) N49930 MEN ON THE MOVE, INC. Principal Place of Business Mailing Address 505 MARTIN LUTHER KING JR. AVENUE 505 MARTIN LUTHER KING JR. AVENUE LAKELAND FL 33801 LAKELAND FL 33815-1527 3. Date Incorporated or Qualified 3a. Date of Last Report 07/17/1992 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3298586 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032. Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GLOVER, KENNETH C. 82 Street Address (P.O. Box Number is Not Acceptable) 505 MARTIN LUTHER KING JR. AVENUE 83 SUITE 1 LAKELAND FL 33801 84 Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alguature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE TATLE 1.1 TITLE Change anders NAME SIMMONS. ROOSEVELT 1.2 NAME Lavon 1905 W. STREET ADDRESS 1909 WEST LAVON STREET 1.3 STREET ADDRESS LoKeland, CITY-ST-7IP LAKELAND FL 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE ☐ Change Addition **VD** NAME HAMILTON, ROBERT 2.2 NAME 040 W. akeland STREET ADDRESS **1031 W 14TH STREET** 2.3 STREET ADDRESS CITY-ST-ZIP <u>Lakeland Fl</u> 2. 4 CITY - ST-ZIP DELETE Addition 3.1 TITLE TITLE NAME WEBLEY, RONALD 3.2 NAME STREET ADDRESS 3638 W. WHEELER RIAD 3.3 STREET ADDRESS CITY-ST-ZIP LAKELAND FL 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME SANDERS, T.J. STREET ADDRESS 1905 W. LAVON 4.3 STREET ADDRESS CITY-ST-ZIP <u>lakeland fl</u> 4.4 CITY - ST - ZIP DELETÉ Change Addition 5.1 T(T) F TITLE NAME BORDERS, RAY 5.2 NAME STREET ADDRESS 1830 W. BELLA VISTA DR. 5.3 STREET ADDRESS AKELAND FL 5.4 CITY- \$1- ZIP CITY-ST-ZIP DELETE Addition TITLE 61 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 1 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 617, Florida Statutes; and that my name

appears in Block 12 or Block 13 if changed, or on an attachment with an

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