FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N93000000429 (1)

SOCIAL ENGINEERING AND RENOVATION, INC.

Principal Plac	rincipal Place of Business Mailing Address								
50 CENTRAL AVE. P.O. BOX 759 SAN MATEO FL 32187		150 CENTRAL AVE. P.O. BOX 758 SAN MATEO FL 32187-0758							
		ONE MATEO TE SZIOTOTO			3. Date Incorporated or Qualified 02/01/1993 3a. Date of Last Report 10/30/1996				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26			59-3164772			ot Applicable	
Sulte, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & Stat	e	City & State			6. Election Campaign Financing			May Be	
23 Zip	Country	28]	Zip Country			Trust Fund Contribution 8. This corporation has liability for it			to Fees
24	25	29	30				Tes		. 199.032,
	9. Name and Address of Currer		1=-1			10. Name and Address of New Reg			
				81	Name				
MORGAN	, Jasper L			82	Street Addr	ress (P.O. Box Number is Not Acceptab	e)		
150 CENT	TRAL AVE.								
SAN MAT	EO FL 32187			83					
				84	City		FL	85 Zip (Code
11 Durauant	to the proviolent of Costinue 617 060	O and C17 1509 Florida Ctatud	lon the of		nomed core	poration submits this statement for the p	. –	abanaina ii	to confetenced
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Such change was	authorize	d by	the corporal	tion's board of directors. Thereby accep	t the appo	onanging it	registered
SIGNATURE								~	
12.	Signature, typed or printed name of registered age OFFICERS AN		Hagistere	d Age	ent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIRECTOR	RS IN 12
TITLE	D DELETE			TLE		7.007.1010.017.1102.0 10 01110	E (O)	Change	Addition
NAME	MORGAN, JASPER L			1.2 NAME				_ •	
STREET ADDRESS	150 CENTRAL AVE.		1.3 STREE		ADDRESS				
CITY - ST - ZIP	SAN MATEO FL 32187		1.4 CITY-ST-ZIP						
TITLE	D DELETE			TLE				Change	Addition
NAME	MORGAN, ERMA		2.2 NAME			V.			
STREET ADDRESS	150 CENTRAL AVE.		2.3 STREE		ADDRESS				
CITY-ST-ZIP	SAN MATEO FL 32187				ST-ZIP			<u> </u>	A distant
TITLE	<u> </u>			TLE				☐ Change	Addition
NAME Street Address	Morgan, Matthew 1506 President St		3.2 N		ADDRESS				
CITY-ST-ZIP	PALATKA FL 32177				ADURESS ST-ZIP				
TITLE	TURVING IP ACISS	DELETE			:			Change	Addition
NAME			4.1 Ti 4. 2 N		Ì				
STREET ADDRESS			4.3 S	REET	ADDRESS				
CITY-ST-ZIP			4.4 CI	<u> TY</u> -S	T-ZIP				
TITLE		DELETE	5.1 Ti	TLE.				Change	Addition
NAME			5.2 N	AME	}				
STREET ADDRESS			5.3 ST	IREET	ADDRESS				
CITY-ST-ZIP		Drive	5.4 CI		T - ZIP			Ch	gare.
TITLE		☐ DELETE	6.1 TI		·			∐ Change	Addition
NAME			6.2 N		1000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	by certify that the information supplie	d with this filing does not quali	fy for the			d in Section 119.07(3)(i), Florida Statutes	. I further	certify that	the
informatio i am an o	on indicated on this annual report or s	supplemental annual report is t the receiver or trustee empoy	true and a vered to s	accu	irate and that	t my signature shall have the same legal rt as required by Chapter 617, Florida S	effect as	if made un	der oath; that

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