FIL	E NO	W: FILING F	EE IS \$61.	25		
NONPROF CORPORA ANNUAL R' 1998	v		ORID DE Seg DIVISION	AL MELT OF S B. ortham tar Distate CONPORATION	X	

Tr Co. portin	IMENT # 1960000		SECRETARY TALLAHASSER		
Principal Pla	ice of Business 1	Mailing Address			
% HEZEKIAH BRADFORD JR. 4230 N.O.B.T. ZELLWOOD, FL. 32798		% HEZEKIAH BRADFORD JR. P.O.BOX 182 ZELLWOOD,FL.32798		 3. Date incorporated or Qualified 6-27-96 4. FEI Number 	Applied For
2. Principal	Place of Business	2a. Mailing Address		59-3486050	Not Applicable \$8.75 Additional
21		26		5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
City's State		City & Slate		Trust Fund Contribution	Added to Fees
23		28		7. Is this nonprofit corporation a homeowr	ners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent	B1 Name	10. Name and Address of New Registers	d Agent
	AH BRADFORD JR.		1-1		
	13TH STREET		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	164574
APOPKA	, FL. 32703		83		01047001
				****122_	
			84 City	F	85 Zip Code
11. Pursuant office or agent 1 a	I to the provisions of Sections 617.050 registered agent, or both, in the State are timiliar, with, and except the policy of the state	rights of Section 617 9503, F	lorida Statutes.	orporation submits this statement for the purpose tration's board of directors. I hereby accept the appropriate the purpose tration's board of directors. I hereby accept the appropriate transport of the purpose training	of changing its registered appointment as registered
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE		☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PD		1.2 NAME		
STREET ADDRESS	HEZEKIAH BRADFORD		1.3 STREET ADDRESS		
CRALSTWIP	3TH ST. APOPKA, FL.	_32703	1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	VORONICA I. BRADFO		2.2 NAME		
CITY-SI-P	21 W. 13TH ST. APO	PKA, FL. 32703	2 3 STREET ADDRESS 2 4 CITY - ST - ZIP		}
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME /	TD		3.2 NAME		
STREET ADDRESS	JAMES GRUBBS		3.3 STREET ADDRESS		
CITY-ST-ZIP	7518 W. HOLLY ST.	ZELLWOOD FL 327	98 3.4. CITY-ST-ZIP		
TITLE	0.00	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SD UPI MA LIVINI		4 2 NAME		
STREET ADDRESS	VELMA WYNN	DI 11100D 0555	4 3 STREET ADDRESS		
DITY-ST-ZIP TITLE	3841 HOLLY COURT Z	ELLWOOD FL 3279			
NAME		FT OCTUR	5.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			5 2 NAME		
CITY - ST - ZIP			5.3 STREET ADDRESS 1 5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	•		6 3 STREET ADDRESS		$M \cap A$

64 CITY-ST-ZIP

14. I 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 informatic 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 address.

SIGNATURE: 2

Harghiah Bradford q

Hezekiah Breadford JR

4/24/98

FILED