FILE NOW: FILING FEE AFTER MAY 1 IS

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS ...

(1)

FILED May 02 1997 8:00am Secretary of State

OCUMENT Corporation Name	#	P33873)
Corporation Name	71	F33073	,

JOHN SAVOY & SON, INC.

Principal Place CHARLES & H MONTOURSVILE	OWARD STREETS	Mailing Address CHARLES & HOWA MONTOURSVILLE P				
					3. Date Incorporated or Qualified 05/08/1991	3a. Date of Last Report 05/01/1996
2. Principal P	lace of Business	2a. Mailing Addres	is .		4. FEI Number	Applied For
21		26			24-0817525	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, e	itc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Α	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30		Florida Statutes	☐ Yes 🔀 No
	9. Name and Address of Cu	rrent Registered Agent		41-11	10. Name and Address of New Re	egistered Agent
	OFELDT, KATHERINE		B	1 Name		T. I
	CEDAR OAK TRAIL		8	2 Street Add	dress (P.O. Box Number is Not Accepta	ble)
LON	IGWOOD FL 32750		8	•		
			6	3		
			8	4 City		FL 85 Zip Code
office or r agent 1 a SIGNATURE	rm familiar with land accept the o	pbligations of, Section 607.09 FELDT	e was authorized I 505. Florida Statut Katuli	by the corpora es. • unl W	ation's board of directors. I hereby acce	H-83-97
-	organism by ed or printed name of registere	eldeplicate it beet beet beet be	NOTE: Registered A	gent signature requ	ulred when reingrating)	DATE
12.		S AND DIRECTORS	13.	gent signature requ	ulted when reinglating) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
12.	OFFICERS P		13.	· · · · · · · · · · · · · · · · · · ·		DATE
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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 changed, or on an attachment with an address.

6.4 CITY+ST-2IP

SIGNATURE: