

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000000264 (1)**

1. Corporation Name
992423 ONTARIO, INC.



Principal Place of Business 5319 PINEVIEW COURT LADY LAKE FL 32159-6006 US	Mailing Address 107 NE 1ST AVE. OCALA FL 33470
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3. Date Incorporated or Qualified 10/28/1992	3a. Date of Last Report 02/20/1995
4. FEI Number 59-3147767	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired 1	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26 P.O. Box 493311
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Leesburg, FL
Zip 24	Country 29 34749-3311 30 US

9. Name and Address of Current Registered Agent HALDIN, WILLIAM C JR 808 SE FORT KING STREET OCALA FL 34471		10. Name and Address of New Registered Agent 81 Name Bell, Edwin J. 82 Street Address (P.O. Box Number is Not Acceptable) 7214 Harbor View Dr. 83 84 City Leesburg FL 85 Zip Code 34788	
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11. Pursuant to the provisions of Sections 607.032 and 607.1508, 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 607.035, Florida Statutes.

SIGNATURE *[Signature]* **Edwin J. Bell, Director** DATE **4/24/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BELL, EDWIN J		1.2 NAME Bell, Edwin J.	
STREET ADDRESS 6 BOESE COURT, ST. CATHARINES		1.3 STREET ADDRESS 7214 Harbor View Dr.	
CITY-ST-ZIP ONTARIO L2N 7E7		1.4 CITY-ST-ZIP Leesburg, FL 34788	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *[Signature]* **Edwin J. Bell, Director** 4/24/96 352-365-7832

CR2E034 (12/95)