## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

TITLE

NAME

STREET ADDRESS

SIGNATURE: (X

14. I hereby certify that the information supplied with this film indicated on this annual reporter supplieriental annual re-officer or director of the corporation or the receiver or tris-

CITY-ST-ZIP

FILED Mar 19 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P9200002756 (4) FLORIDA FALLS, INC. Principal Place of Business Mailing Address 10453 TILLERY RD 10453 TILLERY RD SPRING HILL FL 34608 SPRING HILL FL 34608 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/28/1992 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3148707 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 RUTHENBERG, DOUGLAS A 10453 TILLERY RD 82 Street Address (P.O. Box Number is Not Acceptable) SPRING HILL FL 34608 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.07.02 and 607.1508, Florida Statules, 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or publish name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition RUTHENBERG, DOUGLAS A NAME 1.2 NAME 10453 TILLERY RD STREET ADDRESS 1.3 STREET ADDRESS SPRING HILL FL 34608 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition DIXON, BEN 10453 TILLERY ROAD 2.3 STREET ADDRESS STREET ADDRESS SPRING HILL FL 34608 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 3.1 TITLE TINCH, DENISE NAME 3.2 NAME 10453 TILLERY RD. STREET ADDRESS 3.3 STREET ADDRESS SPRING HILL FL 34608 CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 41 TITLE RUTHENBERG, PATRICIA F 4.2 NAME NAME 10453 TILLERY ROAD STREET ADDRESS 4.3 STREET ADDRESS SPRING HILL FL 34608 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP

DELETE

6.1 TITLE

6.2 NAME

**6.3 STREET ADDRESS** 

thes not outlify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information of t is truckind accurate and that my eignature shall have the same legal effect as if made under oath; that I am an the enjoy of ed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

DOUGLAS A. RUTHENBERG

6.4 CITY-ST-ZIP

Change

Addition