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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthard

Secretary of State
DIVISION OF CORPORATIONS

1998 DIVISION OF DOCUMENT # P92000013364 (4) DEBOER HOLDINGS, INC.

May 15 1998 8:00am Secretary of State

Principal Plac		Mailing Address 37 SKYLINE DRIVE						
STE - 2105 LAKE MARY FL 32746		STE - 2105 Lake Mary Fl 32746		DO NOT WRITE IN THIS SPACE				
US	£ 5£170	US		3. Date Incorporated or Qualified				
						01/01/1993		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-3152897		Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.	75 Additional
22		27				b. Certificate of Status Desired	Fe	e Required
City & Stat	e	City & State				6. Election Campaign Financing	\$5.	.00 May Be
23		28				Trust Fund Contribution	Ad	ded to Fees
Zφ	Country	Z(P	Coun	try		8. This corporation owes or has paid the	current yea	ar Intangible
24	25		30			Personal Property Tax due June 30.	Yes	□ No
	g. Name and Address of Curren	t Registered Agent		: т		10. Name and Address of New Registere	d Agent	
DEI	Boer, evert		[8	31	Name			
148	9 SHADWELL CIRCLE		8	32	Street Add	ress (P.O. Box Number is Not Acceptable)		
SUI	TE 4304					,		
HE	ATHROW FL 32746		ε	33				
			-	34	City		105	Zip Code
			"	"	City	F	L 85	Zip Code
I office or r	egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida, Such change was a stons of, Section 607,0505, Flo	iuthorized irida Statu!	by tes	the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointmen	ng its registered it as registered
12.	Signature hypothol protect many of regulation age OFFICERS AN!			Agur	nt signature requi	red when reinstaling) DATE		TODO IN 10
TITLE	VP CHICKIS AND	DELETE	13.		T	ADDITIONS/CHANGES TO OFFICERS A	Chai	
NAME	DEBOER, NANCY							inge La Roanion
STREET ADDRESS	1489 SHADWELL CIRCLE		1 2 NAM		ADMESOS			
	HEATHROW FL				ADDRESS			
CITY-ST-ZIP TITLE	P P	DELETE	_	1.4 CITY - ST - ZIP 2.1 TIJLE			Chai	nge Addition
NAME	•	_ Killie		22 NAME			L Cria	inge Nuonitori
	DEBOER, EVERT							
STREET ADDRESS	1489 SHADWELL CIRCLE			2 3 STREET ADDRESS 2 4 City-St-7P				
CITY-ST-ZIP TITLE	HEATHROW FL	DELFTE	_		1 - 71P		☐ Chai	nge Addition
		LJ DEGIE	3.1 TITL					iyo L Madilibii
NAME			3 2 NAM					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	<u></u>		3.4 CITY		J - ZIP			1 222
TITLE		☐ DECETE	4.1 1/TL	_			L Char	nge L Addition
NAME			4. 2 NAN		1			
STREET ADDRESS			4.3 S1R	EET /	ADDRESS			

14. Thereby 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 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 supplied with this filing does not qualify for each great and accurate and that ply 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 trusted 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

4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY - ST - ZfP

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

51 TITLE

5.2 NAME

6 1 THILE

6.2 NAME

DELF TE

DELETE

CITY - ST - ZIP

STREET ADORESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ALL det 5/1/a

G07-313-0208

Change

☐ Addition

Addition