

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 PM 12:00

DOCUMENT # P93000009661 (8)

1. Corporation Name

LITTLE INVESTMENT CORPORATION

Principal Place of Business

Mailing Address

% JOHN M. MORGAN
302 LEE BLVD., SUITE 102
LEHIGH ACRES FL 33936

% JOHN M. MORGAN
302 LEE BLVD., SUITE 102
LEHIGH ACRES FL 33936

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
02/08/1993

3a. Date of Last Report
04/29/1994

2. Principal Place of Business

2a. Mailing Address

21 745 MIRROR LAKE DR
Suite, Apt. #, etc.

26 745 MIRROR LAKE DR
Suite, Apt. #, etc.

4. FEI Number
65-0384935

Applied For
Not Applicable

22 City & State

27 City & State

23 Lehigh Acres FL
Zip

28 Lehigh Acres FL
Zip

24 33936

25 Lee

29 33936

30 Lee

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORGAN, JOHN M
302 LEE BLVD.
SUITE 102
LEHIGH ACRES FL 33936

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of agent or officer of corporation and file application)

(NOTE: Registered Agent signature required when reinstating)

DATE

1-30-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BOROSCH, EUGEN K
STREET ADDRESS 745 MIRROR LAKES DRIVE
CITY - ST - ZIP LEHIGH ACRES FL 33936

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is true and correct 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 recorder or limited unpowered to record 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 a Lockman.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Printed Name