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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000011354 (6) AFFORDABLE/CITRUS GLEN, INC.

FILED May 05 1997 8:00am Secretary of State



Principal Place 1637 E VINE S SUITE E KISSIMMEE FL US	τ	Mailing Address 1637 E VINE ST SUITE E KISSIMME FL 34744-3744 US	•		3. Date Incorporated or Qualified 02/15/1993	3a. Date of 05/01/18	Last Report
9 Origanal D	lace of Business	2a. Mailing Address			4. FEI Number	1 00/01/18	
— ·	nace of business	├ ─┐			59-3203041	}	Applied For
Sulte, Apt.	# etc	Suite, Apt. #, etc.		······	J9-02U0U4 I		Not Applicable 75 Additional
22	n, oto.	27			5. Certificate of Status Desired	1 1 1 1	ee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution		
Zip	Country	Zip	Coun	lry	8. This corporation has hability for in		nder s. 199.032,
24	25	29	30			Yes X No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	Istered Agent	
	ON, KENNETH G		. [1	31 Name			
	7 E VINE ST		ti	32 Street Add	ress (P.O. Box Number is Not Acceptable	e)	
	TE E		<u> </u>			,	
, KISS	SIMME FL 34744] 1	33			
			ļī	34 City		85	Zip Code
					poration submits this statement for the p dion's board of directors. I hereby accep	FL "	<u> </u>
SIGNATURE	Signature, typod or printed name of registered age OFFICERS AND	DIRECTORS	OIE Registered	Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC		
TITLE	D	DELETE	1.1 1111	E T		□ c	hange Addition
NAME	HINNERS, THOMAS G		1.2 NAM	AE			
STREET ADDRESS	499 BOYNTON BAY CIRCLE		1,3 STR	LET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL 33435			7 - S1 - 7IP			
TITLE	DP DIGIT A MANAGE	☐ DELETE	2 1 1111	1		[_] 0	hange L Addition
NAME	RICH, A WAYNE		2.2 NAM	1		÷	
STREET ADDRESS	P O BOX 1911 N/A			ELT ADDRESS			
CITY-ST-ZIP	ORLANDO FL			Y-S1-ZIP			
TITLE	VST	[_] DELETE	3 1 Till				hange L Addition
NAME	DIXON, KENNETHG		3 2 NAM				
STREET ADDRESS	1837 E VINE ST STE E KISSIMMÉE FL			EET ADDRESS			
CITY-ST-ZIP	NIODIMMEC FL	Dritte		Y-S1-ZIP			hanon Addition
TITLE		L_) DELETE	41111			LJU	hange Addition
NAME			4 2 NA				
STREET ADDRESS			1	FET ADDRESS			
CITY-ST-ZIP		DELETE		Y-ST-7IP		—	hange Addition
TITLE		C) precept	5 1 Till				nongo La Addition
NAME CTREET ADDRESS	1		1AN S 3				
STREET ADDRESS				EFT ADDRESS			
CITY-ST-ZIP TITLE		DECETE	5 4 CIT	Y-S1-ZIP			hange Addition
		FT bereit				— ч	nango
NAME CORET ADDRESS			62 NAI	AL FET ADDRESS			
STREET ADDRESS			1				
CITY-ST-ZIP			6.4 CiT	Y-ST-ZIP			

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 or changed, or on an attachment with an address.