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

PROFIT CORPORATION ANNUAL REPORT

**19**98

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY+ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000013604 (2)

**OPERATORS STANDING BY, INC.** 

Principal Plac	e of Business	Mailing Address	•				<b>   </b>	198 11100 BIRIT BRI	() <b>010</b> () 100(
2197 RINGUN	IG BLVD.	P. O. BOX 49828							
SARASOTA FL 34237		SARASOTA FL 34320		DO NOT WOL	re iki tilik	00405			
US		US				DO NOT WRIT  3. Date Incorporated or Qualified		SPACE	
9 Principal P	Place of Business	2a. Mailing Address			<del></del> -	02/15/1993 4. FEI Number	<del></del>		plied For
21	laber of Boshioss	26				i		<del>- +</del>	ot Applicable
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.				65-0394635		\$8.75	
22		27				5. Certificate of Status Desired		Fee Re	
City & Stat	te	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added t	lo Fees
Zip	Country	Zιρ		Country		8. This corporation owes or has p			
24	25	29	30			Personal Property Tax due Jun			No
9. Name and Address of Current Registered Agent					Ness	10. Name and Address of New R	egistered	Agent	
LEWIS, JERRY D				81	Name				
2197 RINGLING BLVD.				82	Street Add	fress (P.O. Box Number is Not Accepta	able)		
SARASOTA FL 34237				00					
				83					
				84	City			<b>85</b> Zip (	Code
4476		00 - 1007 (500 F) - 11 - F(-)					FL		
office or r	registered agent, or both, in the State	of Florida. Such change wa	s author	rized by	the corpora	poration submits this statement for the ation's board of directors. I hereby according	purpose of apt the ap	or changing it pointment as	s registerea   registered
agent. I a	rm familiar with, and accept the oblig	ations of, Section 607.0505,	Florida	Statutes	<b>3</b> .				•
SIGNATURE	Signature, typed or printed name of registered ag		015 P			ired when reinstating)	DATE		
12.		D DIRECTORS		13.	nt signature requ	ADDITIONS/CHANGES TO OFF		D DIRECTOR	S IN 12
TITLE	D	DELETE		.1 TITLE	<del></del>	Accincto, of white control of the	102/10/11	Change	Addition
NAME	LEWIS, JERRY D			2 NAME					_
STREET ADDRESS	2197 RINGLING BLVD.			.3 STREET	ADDRESS				
CITY-ST-ZIP	SARASOTA FL			A CITY-S					
TITLE		DELETE	_	2.1 TITLE	-			Change	Addition
NAME			2	2 NAME					
STREET ADDRESS			2	3 STREET	ADDRESS		٠		
CITY-ST-ZIP	<u> </u>		2	. 4 CITY-S	ST-ZIP				
TITLE	-	☐ DELETE	3	1 TITLE				Change	Addition
NAME			3	.2 NAME					
STREET ADDRESS			3	3.3 STREET	ADDRESS				
CITY-ST-ZIP			3	.4. CITY - S	T-ZIP				]
TITLE		☐ DELE <b>te</b>	4	A TOTLE		,		Change	Addition
NAME			4	. 2 NAME					
STREET ADDRESS			- 14	.3 STREET	ADDRESS				

14. I 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 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

DELETE

DELETE

CR2E034 (10/97)

Change

Change

Addition

\_\_\_ Addition

**FILED** 

Apr 23 1998 8:00am

Secretary of State