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

Mailing Address

ORLANDO FL 32810-5704

1912 B LEE RD

STE C-2

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Prace of Business

1912 B LEE RD

ORLANDO FL 32810

SIGNATURE:

STE C-2



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000029184 (7)

MAKING A CHANGE CONSULTING GROUP, INC.

US	US					 Date Incorporated or Qualified 04/20/1993 		ate of Las 01/1996			
2. Principal Place of Bus	siness	2a t	Mailing Address				4. FEI Number	100/		· · · · · · · · · · · · · · · · · · ·	
21	······································			26			59-3196795		h	Applied For	
Suite, Apt. #, etc.			iuite, Apt. #, etc.							Not Applicable 5 Additional	
[22]		27	, . , ,				5. Certificate of Status Desired			Required	
City & State			City & State				6. Election Campaign Financing		,,	0 May Be	
23	28	.]				Trust Fund Contribution Added to Fees					
Ζφ	Country	Z	lip	Coun	ntry		8. This corporation has liability for it	ntanoible			
24	25 29 30						Florida Statutes Yes No				
	e and Address of Curr	ent Registe	red Agent				10. Name and Address of New Reg	letered	Agent		
MIXON, CARO				1	81	Name					
1912-B LEE ROAD				Ta la	82 Street Address (P.O. Box Number is Not Acceptable)						
STE C-2											
Orlando fl	32810				83						
				7	84	City	· · · · · · · · · · · · · · · · · · ·		85 Z	ip Code	
						J.,,		FL	" ~	p Code	
office or registered a	isions of Sections 607,09 agent, or both, in the Sta with, and accept the obl	te of Florida	. Such change was .	authorized	bv	the corpora	rporation submits this statement for the plation's board of directors. I hereby accep	irpose of t the app	changing ointment	g its registered as registered	
SIGNATURE _				orioa Statu	nes						
	od or printed name of registered a				Ager	nt signature requ	uired when reinstating)	DATE			
12.	OFFICERS A	ND DIRECT	DELETE	13.		 1	ADDITIONS/CHANGES TO OFFIC	ERS AND			
	CAROLINE		□ Dereie	1.1 TITL					Chang	e 🔲 Addition	
4040 B	LEE RD STE C-2			1.2 NAN							
ODI ANIE						ADDRESS					
TITLE D	/V 1 L	·····	DELETE	1.4 C(T)	******	- ZIP			I I Chana		
NAME CROOKS	S RAY		93-16111	2.1 TITL					Chang	e	
	LEE RD STE C-2			2.2 NAM		1000000					
CITY-ST-ZIP ORLAND						ADDRESS					
TITLE			☐ DELETE	2. 4 CIT 3.1 TITL		1-202	N.	ر ال	Chang	e Addition	
NAME				3.2 NAM			-	•	L. Oiking	C L Addition	
STREET ADDRESS						ADDRESS					
City-ST-ZIP				3.4. CIT							
TITLE			DELETE	4.1 TiTL		. 211			Chang	e Addition	
NAME:				4. 2 NA							
STREET ADDRESS						ADDRESS					
City-S1-ZiP				4.4 CITY							
TITLE			□ D€L€TE	5.1 TITU					Chang	e Addition	
NAME				5.2 NAM	ΛE						
STREET ADDRESS				,		ADDRESS					
CITY-ST-7IP				5.4 CITY							
THUE			DELETE	6 1 TITL					Chang	e Addition	
NAME				62 NAM		ł					
STREET ADDRESS				63 STRE		ADDY 55					
City-St-7-P				6.4 City		,					
14. I do hereby certify th	at the information suppli	ed with this	filing does not quali	fy for the		5, 1	d in Section 119.07(3)(i), Florida Statutes				
14. I do hereby certify the information indicated I am an officer or din appears in Block 12	on this annual report or ector of the corporation of the corporation of Block 18 if shanged.	supplement or the receiver or on an alta	tal annual report is t er or trustee empow achmed with an add	rue and rered to dress.		i po	et my signature shall have the same legal ort as required by Chapter 607, Florida St	effect as atutes; a	if made indicated	under oath; that y name	