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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS



97 JUN 16 AM 7: 48

DOCUMENT # P9300031150 (4) ECHO POINT FARM, INCORPORATED							SECRETARY OF STATE TALLAHASSEE FLORIDA			
Principal Place	a of Rusinoss		Moilion	Addroso						
Principal Place of Business Mailing Address 2803 PRAIRIE VIEW DR LOXAHATCHEE FL 33470 LOXAHATCHEE FL 33470-2548										
	_						3. Date incorporated or Qualified 04/28/1993	1	e of Last R 8/1996	eport
2. Principal Place of Business			2a. Mailing Address			4. FEI Number Applied For 65-04 16373 Not Applieable				
Suite, Apt.	#, etc.	26 Suite, Apt. #, etc.					\$8.75	ot Applicable Additional		
22			27			5. Certificate of Status Desired			equired	
City & State	0	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be		
23 Zip	Coi	intry	Zip		Country	/	8. This corporation has liability for it	ntangible t	ax under s	
24	25	d	29		30		Florida Statutes 10. Name and Address of New Ret	Yes _	• • • •	
001	9. Name and Ad	dress of Curren	r wedistered	Agent	B1	Name	10. Name and Address of New He	gistereo A	gent	
SCHMIDT, DAVID W 100 NE 5 AVE							78 A. B. T.	1-3		
DELRAY BEACH FL 33483					82	Street Addr	ress (P.O. Box Number is Not Acceptab	10)		
	•				83					
	•	1	,		84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of	Societis 607.0502	? and 607.150	08, Florida Statul	es, the abov	e-named corr	poration submits this statement for the p	urpose of o	l changing it	s registered
office or n agent. I a	egistered agent or m familiar with a pr	oth, in the State ecept the obliga	of floodia. Su My is of, Sect	ch change was ion 607.0505, Fl	authorized b oričia Statute	y the corporat s.	poration submits this statement for the p tion's board of directors. I hereby accep	of the appo	irilment as	registered
SIGNATURE		nanio of registered age	///>>	<u> </u>	ERK	: Z >	regischen reinstat (p)	<u>5/2</u>	0/9	' ク
12.		OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12
TITLE	D			☐ DELETÉ	1,1 THEE				A	Addition
NAME	SPOOR, KERRI							L	Change	
STREET ADDRESS	2803 PRAIRIE V				1.2 NAME			l		
CITY-ST-ZIP TITLE					1.3 \$1REET	F ADDRESS		l		, , ,
	LUMANATURE	FL 33470		DELETE	1.3 STREET 1.4 CITY - 5			l		Addition
I NAME I	LOAMMATCHEE			DELETE	1.3 STREET 1.4 CITY - S 2.1 TITLE		300005	216		Addition
NAME Street ad dress	LOMINATORE			DET ÉTE	1.3 STREET 1.4 CITY - 5	ST - ZIP	3000022 -06/18/	216: 9701		Addition C
	LOMINIONEE			DEL ETE	1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME	ST-ZIP	3000022 -06/18/ ***165	216 97-00 0.00		Addition
STREET ADDRESS	LOAMATORE			DELETE	1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAMF 2.3 STREET	ST-ZIP	3000022 -06/18/ ***165	216 97-0 0.00		☐ Addition 001 50.00 ☐ Addition
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nereby certify that the information pupilier with missing does not quality for the exemption stated in section 119.07(3)(f), Florida Statutes. In other certify that the information indicated on this annual report is upplemental, annual report is true and accurate and that my signature shall have the same legal effect as if made under that my not appears in Block 12 or Block 13 is changed, or on an another with an address.