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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

1. Corporation		0036785 (2)					
Low	NO.						
Principal Plac	ce of Business	Mailing Address			-	1810 1	
7011 INTERNATIONAL DR 298 OHIO ST ORLANDO FL 32769 WINTER PARK FL 32789					DO NOT WRITE I	N TUIC CDACE	
US		US			3. Date Incorporated or Qualified	N IDIS SPACE	
		V			05/20/1993		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 26		26			59-3190099	Not Applicab	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional	
		27			5. Certificate of Status Desired	Fee Required	
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid		
24	9. Name and Address of Curren		30		Personal Property Tax due June 3 10. Name and Address of New Reg		
Atte		r negisteren Agent	81 Name		10. Name and Address of New Reg	istered Agent	
	ELSEN, GORDON A		J. Haine	'			
	B OHIO ST		82 Street	Addre	ddress (P.O. Box Number is Not Acceptable)		
AAII	NTER PARK FL 32789		83				
			84 City			EL 85 Zip Code	
11 Pursuant	to the provisions of Section 807 9503	and 807 1508. Florida Statutas	the above-named	1 corpo	visition submits this statement for the nu		
office or r	registered agent, or both, in the Flate	of Florida. Such change was au	thorized by the cor	poratio	oration submits this statement for the purion's board of directors. I hereby accept	the appointment as registered	
1	im familiar was a foliacept tify dollage	itions it section 607,0505, Flor	ida Statutes.				
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE.	Registered Agent signature	e required	when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIBECTORS IN 12	
TITLE	DST	☐ DELETE	1.1 TITLE			Change	
NAME	NIELSON, GORDON A		1.2 NAME	M	IELS EN		
STREET ADDRESS	7011 INTERNATIONAL DRIVE		1 3 STREET ADDRESS				
CITY - ST - ZIP	ORLANDO FL		1.4 CITY - ST - ZIP				
TITLE	DP	DELETE	2,1 TITLE			Change Additio	
NAME	NIELSEN, ALF R		2.2 NAME				
STREET AODRESS	716 KELLY'S COVE		2.3 STREET ADDRESS		•	.=	
CITY-ST-ZIP	OCOEE FL		2 4 CITY-ST-ZIP				
YITLE	VD	☐ DELETE	3.1 TITLE			Change Addition	
NAME	NIELSEN, ELMA D		3.2 NAME		<i>:</i>		
STREET ADDRESS	298 OHIO ST		3.3 STREET ADDRESS				
CITY - ST - ZIP	WINTER PARK FL		3.4. CITY-ST-ZIP	<u> </u>			
TITLE	DAST	☐ DELETE	4.1 TITLE		TO LOST FREE	Change Addition	
NAME.	NIELSEN, STEVE E		4. 2 NAME	-	no lestras	5 LANE	
STREET ADDRESS	734-LAUREL-WAY-		4.3 STREET ADDRESS	3	10 COST HICE	~ ~ //· &	
CITY - ST - ZIP	CASSELBERRY FL	The rec	4.4 CITY - ST - ZIP	ļ			
TITLE	U ANTO OTAL MANITOR AS	DELETE	5.1 TITLE		*		
NAME	NEILSEN, JANET M		5.2 NAME		IELSEN		
STREET ADDRESS	16104 SANDHILL RD		5.3 STREET ADDRESS				
CITY-ST-ZIP	WINTER GARDEN FL	[***] never	5.4 CITY - ST - ZIP	ļ			
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS	1			

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 report is true and 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 the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the state of the same appears in Block 12 or Block 13 if changed, or on the same appears in Block 12 or Block 13 if changed, or on the same appears in Block 12 or Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or on the same appears in Block 13 if changed, or o

SIGNATURE:

FILED

Jan 29 1998 8:00am

Secretary of State