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PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-7IP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000043457** (9)

WILLIAM KELLY & COMPANY, P.A.

Principal Place of Business Mailing Address 1006 W. WOODLAND BLVD. P.O. BOX 1430 DELAND FL 32720 DELAND FL 32721-1430 U\$ 3. Date Incorporated or Qualified 3a. Date of Last Report 06/14/1993 03/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1006 N WOODLAND ALVO. 26 59-3186158 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KELLY JR., WILLIAM C 1006 N. WOODLAND BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE B 83 DELAND FL 32720 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typica or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Tilbe 1.1 TITLE Change Addition KELLY, WILLIAM C JR NAME 1.2 NAME 1006 NORTH WOODLAND BLVD. STREET ADDRESS 1.3 STREET ADDRESS DELANO FL 32720 CITY - ST - ZIP 14 CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition NAME. 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CHTY-ST-ZIE 2 4 CITY-ST-ZIP DELETE THUE 31 TITLE Change Addition NAME 32 NAME STREET ADDRESS **33 STREET ADDRESS** CITY - ST - ZIF 34. C!TY-ST-ZIP TITLE □ DELETE 4.1 TITLE Change ■ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP ☐ DELETE TIT.E 51 TITLE ☐ Change ___ Addition NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Addition 6.1 TITLE Change NAME 6.2 NAME

6.3 STREET ADDRESS

与E(山) 阿伊田 C. Kerry JK

6.4 CITY - ST - ZIP 14. 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

FILED Jan 29 1997 8:00am Secretary of State

