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

PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 25 1998 8:00am Secretary of State

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|--|--|-----------------------------|----------------------|----------------------------------|--|---|
| Principal Plac | e of Business | Mailing Address | | | I IBDIKINDI HIS IDIDA HIYI DDIH BEHI SEHII | OBIN 84040 10010 11007 30181 0117 309 |
| 417 SOUTH SEMORAN BLVD. 417 SOUTH SEMORAN BL | | | AN RIVE | | | |
| WINTER PARK FL 32792 WINTER PARK FL 32792 | | | | | 50.007.007.0 | |
| us us | | | | | DO NOT WRITE I | N THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | | 06/28/1993 4. FEI Number | l lander Con |
| 21 | | 26 | , | | 59-3188697 | Applied For Not Applicable |
| Suite, Apt. #, etc Suite. Apt. #, etc. | | | o. | | | 60 7E |
| 27 | | | | 5. Certificate of Status Desired | Fee Required | |
| City & State City & State | | | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 28 | | 28 | | | Trust Fund Contribution | Added to Fees |
| Zip | | | Count | iry | 8. This corporation owes or has paid | f the current year Intangible |
| 24 | [25] | 29 | 30 | | Personal Property Tax due June 3 | |
| 1000 | 9, Name and Address of Curre | ant Hegistered Agent | | 1 Name | 10. Name and Address of New Reg | Istered Agent |
| | ATT, DONNA C | | ۱۳ | 1 Name | | |
| 1981 COVE COLONY RD | | | 8 | 2 Street Add | ress (P.O. Box Number is Not Acceptable |) |
| MAITLAND FL 32751 | | | 8 | 3 | | |
| | | | ľ | 3 | | į |
| | | | 8 | 4 City | | 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607.05 | 502 and 607 1508 Florida (| Statutes the abo | we-pamed cov | poration submits this statement for the nu | FL US Exp Cook |
| 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, typed or printed name of registered a | cont and title if appacable | (NOTE: Registered A | gent signature regul | red when reinstaling) | DATE |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICE | |
| TITLE | D | DELET | E 1.1 TITLE | | | Change Addition |
| NAME | HOYT, ANDREW W | | 1.2 NAM | E [| | 13 |
| STREET ADDRESS | 2243 CHURCHILL DOWNS C | HRCLE | 1.3 STRE | ET ADDRESS | | ļ. |
| CITY-ST-ZIP | ORLANDO FL 32825 | | 1.4 CITY | -ST-ZIP | | |
| TITLE | D | ☐ DELETI | E 2.1 TITLE | | | Change Addition C |
| NAME | WYATT, DONNA C | | 2.2 NAMI | E | | |
| STREET ADDRESS | 1961 COVE COLONY RD | | | et address | | |
| CITY-ST-ZIP | MAITLAND FL D | DOLET | 2. 4 CITY | | W-24 - 14 - 14 - 14 - 14 - 14 - 14 - 14 - | |
| TITLE NAME | GRAHAM, DARYL G | ☐ DÉLETI | | | | ☐ Change ☐ Addition |
| STREET ADDRESS | 1961 COVE COLONY RD | | 3.2 NAM | | | |
| CITY-ST-ZIP | MATILAND FL | | | ET ADDRESS | | |
| TITLE | MAIRARIP | DELETE | 3.4. CrTY 4.1 TITLE | | · | Change Addition |
| NAME | | | 4.1 IIILE 4.2 NAM | ı | | CT CHANGE CT MODICOLL |
| STREET ADDRESS | | | | ET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY | 1 | | |
| TITLE | | DELETE | | | | Change Addition |
| NAME | | | 5.2 NAME | | | |
| STREET ADDRESS | | | | ET ADORESS | | |
| CITY-ST-ZIP | | | 5.4 CITY- | | | |
| TITLE | | DELETE | | | | Change Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STREE | T ADORESS | | |
| CITY - ST - ZIP | | | 64 CITY | 1 | | |
| 4.4 Lharabu a | artify that the information pumpled | with this files a dusc made | 11.7 | | On allow 440 07/0000 Finally Death 4 14- | 11 11 11 11 11 11 11 11 11 11 11 11 11 |

I mereby 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.

2/20/98

407 671.0623