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

Mailing Address P.O. BOX 256

ALTURAS FL 33820-0256

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

#3 ALBRITTON ROAD

ALTURAS FL 33820



FLORIDA DEPARTMENT OF STATE

FILED

Apr 08 1997 8:00am

Secretary of State

3a. Date of Last Report

04/05/1996

3. Date Incorporated or Qualified

06/30/1993

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000047870 (9)

HIGHWAY 17 INCORPORATED

26 Suite, Apt #, etc Suite, Apt. #, etc 2	Coun			59-3191881 5. Certificate of Status Desired	\$8.75 A Fee Re		
Suite, Apt #, etc 2	ļ			5. Certificate of Status Desired			
City & State City & State 28 Zip Country Zip 29 9. Name and Address of Current Registered Agent WILSON, DONALD H JR.	ļ						
Ztp Country Ztp 4 25 29 9, Name and Address of Current Registered Agent WILSON, DONALD H JR.	ļ			6. Election Campaign Financing	\$5.00	May Be	
2ip Country Zip 4 25 29 9. Name and Address of Current Registered Agent WILSON, DONALD H JR.	ļ			Trust Fund Contribution	Added t		
9. Name and Address of Current Registered Agent WILSON, DONALD H JR.	30	ntry		8. This corporation has liability for intangible t	ax under s.	199.032,	
9. Name and Address of Current Registered Agent WILSON, DONALD H JR.		Florida Statutes Yes No					
			Name	10. Name and Address of New Registered A	gent		
·							
APO P DAMPOON OT			82 Street Address (P.O. Box Number is Not Acceptable)				
	Ļ.	84	City		85 Zip (Code	
			-	FL.			
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Sta office or registered agent, or both, in the State of Florida. Such change wa agent I am familiar with, and accept the obligations of, Section 607.0505, SIGNATURE Signature type for printed name of registered agent and site of applicable (for the formal state of the formal state o	as authorized Florida Statu	utes.	ne corporation	on's board of directors. I hereby accept the appoint of the directors of the property of the directors of th	ointment as	registered	
12. OFFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	IS IN 12	
TITLE V DELETE	1.1 TIT	t.E			Change	☐ Addition	
NAME ALBRITTON, DALE E	1.2 NA	1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS P.O. BOX 258 N/A	1.3 STF						
City-St-20F ALTURAS FL	1.4 CIT	IY-ST-	ZIP				
TITLE ST DELETE		2.1 TITLE			Change	Addition	
NAME ALBRITTON, NICHOLAS F	2 2 NA	ME					
STREET ADDRESS P.O. BOX 258 N/A	2.3 STI	REET AL	DDRESS				
CHY-ST-78 ALTURAS FL	2. 4 Ci	ITY-ST	- ZIP				
TITLE P DELETE	3 1 TIT	31 TITLE 32 NAME			☐ Change	Addition Addition	
NAME HOLLAND, A.E. JR.	32 NA						
STREET ADDRESS 595 S. JACKSON AVE.	3.3 STI	REET A	DDAESS				
CITY-S1-2i0 BARTOW FL	3.4. CF	ITY-ST	- ZiP	114.0000			
TILLE DELETE	4.1 TIT	TLE			Change	Addition	
NAME ALBRITTON, ISSAC F.	4. 2 N	AME					
STREET ADDRESS 3030 MISSION OAKS TR.	4.3 \$1	REET A	DORESS				
City-St-7IP BARTOW FL	4.4 CH	TY-ST-	- Z IP				
TITLE DELETE	5.1 TIT	TLE			Change	Addition	
NAME	5,2 NA	AME					
STREET ADDRESS	5.3 ST	TREET A	ODRESS				
CHY-SI-ZIP	5.4 CH	TY-\$T-	-ŽIP				
THE DELETE	6.1 TII	TLE			Change	Addition	
NAME	6.2 NA	AME					
STREET ADDRESS	6.3 ST	TREET A	ADDRESS				
CITY-ST ZIP	6.4 CI	ITY-ST-	- ZIP				
14. I do hereby certify that the information supplied with this filing does not quinformation indicated on this annual report or supplemental annual report. I am an other or director of the corporation or the receiver or trustee employers.	ualify for the	exem	nption stated	d in Section 119.07(3)(i), Florida Statutes. I further	certify that	the ider oath: tha	