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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000051463 (6)

## Feb 18 1998 8:00am Secretary of State

**FILED** 

PALM (	CITY SHUTTLE, INC.					
Principal Place of Business 3280 S.W. 69TH DR. PALM CITY FL 34990 US		Mailing Address 3290 S.W. 69TH DR. PALM CITY FL 34990 US	3280 S.W. 69TH DR. PALM CITY FL 34990		DO NOT WRITE IN TH	
					3. Date Incorporated or Qualified 07/19/1993	
2. Principal Pi	ace of Business	2s. Mailing Address 26			4. FEI Number 65-0426853	Applied For Not Applicable
Suite, Apt	#, otc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	)	City & Stale			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24			Count	гу	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible  Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	red Agent
DA	VIS, RICHARD H	· · · · · · · · · · · · · · · · · · ·	8	1 Name		
7371 S.W. 40TH TERRACE PALM CITY FL 34990			8	2 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
			8	1		las I Zin Codo
			6	4 City		85 Zip Code
	o the provisions of Suctions 607.0507 ogistered agont, or both, in the State in familiar with, and accept the obliga	and 607.1508, Florida Statu of Florida, Such change was tions of, Section 607.0505, Fl	tes, the abo authorized ( orida Statut	ve-named co by the corpo es.	orporation submits this statement for the purpos ration's board of directors. I hereby accept the	se of changing its registered appointment as registered
SIGNATURE	Stynature, lypeid or printed name of registered ages	it and title if appticable (NO	II Registered A	geni signature re	quired when reinstating) DA	TE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME	DAVIS, RICHARD H		1.2 NAM			į:
STREET ADDRESS	3280 S.W. 69TH DRIVE		13 STRE	ET ADDRESS	•	Įi
CITY-ST-ZIP	PALM CITY FL		1.4 CITY	-ST-ZIP		
TITLE	SID	☐ DELETE	2.1 TITLE			Change Addition
NAME	DAVIS, ARLANE		2.2 NAMI	:		
STREET ADDRESS	3280 S.W. 69TH DRIVE		2 3 S1RE	ET ADORESS	\$ * · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP	PALM CITY FL		2. 4 CITY	-\$1-ZIP		
TITLE		☐ DETETE	3 1 TITLE			Change Addition
NAME			3 2 NAM			
STREET ADDRESS			33 STRE	ET ADDRESS		
CITY-ST-ZIP	·	·····	3 4. CITY			
TITLE		☐ DELETE	41 TiTLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	<del></del>		, ,
TITLE		☐ DELETE	5.1 TITLE	- 1		Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-S1-ZIP			5.4 CITY			
TOTLE		DELETE	6.1 TITLE			Change  Addition
NAME			6.2 NAM	:		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY	ST-ZIP		

4. 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 of 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 of the resolver 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 change) or on an attyrishment with an address

SIGNATURE: ( Se'low ( )

2-12-98

561-223-0018