

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000064560 (4)**

1. Corporation Name

S. D. ANDERSON ENTERPRISES INC.

Principal Place of Business
**7996 W. GULF TO LAKE HWY
CRYSTAL RIVER FL 34429**

Mailing Address
**7996 W. GULF TO LAKE HWY
CRYSTAL RIVER FL 34429**

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified **09/09/1993** 3a. Date of Last Report **06/09/1994**

4. FEI Number **59-3166948** Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	County	29	County

9. Name and Address of Current Registered Agent

**ANDERSON, DEBORAH K
7996 WEST GULF TO LAKE HWY
CRYSTAL RIVER FL 34429**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 Deborah K Anderson DATE 4/27/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ANDERSON, DEBORAH K
STREET ADDRESS	7996 WEST GULF TO LAKE HWY
CITY - ST - ZIP	CRYSTAL RIVER FL 34429
TITLE	Rob
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Holds no office <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	ROBBIE ANDERSON <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	7996 W GULF TO LAKE HWY
2.3 STREET ADDRESS	CRYSTAL RIVER FL 34429
2.4 CITY - ST - ZIP	P
3.1 TITLE	CHRISTOPHER ANDERSON <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	7996 W GULF TO LAKE HWY
3.3 STREET ADDRESS	CRYSTAL RIVER FL 34429
3.4 CITY - ST - ZIP	UP
4.1 TITLE	EDGAR FULTON <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	7996 W GULF TO LAKE HWY
4.3 STREET ADDRESS	CRYSTAL RIVER FL 34429
4.4 CITY - ST - ZIP	TEES
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, above, or on an attached sheet with an address.

SIGNATURE: Edgar Fulton DATE 4/27/95 (904) 995-7643