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 # P93000069583 (1)

WINTER GARDEN FINANCE COMPANY

Principal Place of Business Mailing Address 571 MERCY DR. ORLANDO FL 32805 ORLANDO FL 32905 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/06/1993 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3206255 Not Applicable 21 26 Suite Apt #, etc. \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BERRY, DANIEL A 12403 W. COLONIAL DR. Street Address (P.O. Box Number is Not Acceptable) 82 WINTER GARDEN FL 34787 83 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 to 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 limitar with, and accept the obligations of Section 607.0505, Florida Statutes. 3-25-98 (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 RS AND DIRECTORS 12. 13. Addition Change **DELETE** TITLE BERRY, DANIEL A NAME 1.2 NAME 2823 Mid Summer Dr. Wirdermere, FC 12403 W. OOLONIAL DR. 1.3 STREET ADDRESS STREET ADDRESS -WINTER GARDEN FL 84767 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZYP " DELETE Addition 4.1 TITLE TITLE 4.2 NAME NAME

CITY-ST-ZIP

14. 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 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 compration 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 charged or on an attachment with an address.

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

54 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE: Nanul G Berry

STREET ADDRESS

STREET ADDRESS CITY+ST-ZIP

STREET ADDRESS

TITLE

CITY-ST-ZIP

725 48

CR2E034 (10/97)

Change

Change

Addition

Addition

FILED

May 08 1998 8:00am

Secretary of State