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Apr 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **P93000084309 (2)**

1. Corporation Name
AVISTA PROPERTIES III, INC.

Principal Place of Business

**3956 W COLONIAL DR
ORLANDO FL 32808**

Mailing Address

**3956 W COLONIAL DR
ORLANDO FL 32808-7826**



3. Date Incorporated or Qualified

12/06/1993

3a. Date of Last Report

04/10/1996

4. FEI Number

59-3221573

Applied For

Not Applicable

2. Principal Place of Business

21
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

22. City & State

23

Zip

Country

27. City & State

28

Zip

Country

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

9. Name and Address of Current Registered Agent

**VALBH, ANIL
3330 W COLONIAL DR
ORLANDO FL 32808**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

3956 W. COLONIAL DRIVE

83.

84. City

ORLANDO

FL

85. Zip Code
32808

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 of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D VALBH, ANIL**
STREET ADDRESS **3956 W COLONIAL DRIVE**
CITY-STATE-ZIP **ORLANDO FL**

TITLE ☐ DELETE
NAME **D PATEL, ISHWAR V**
STREET ADDRESS **928 N BAY STREET**
CITY-STATE-ZIP **EUSTIS FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **P/S/T**
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **V NANA, AJIT**
2.3 STREET ADDRESS **3956 W. COLONIAL DRIVE**
2.4 CITY-STATE-ZIP **ORLANDO, FLORIDA 32808**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do 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 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 no address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANIL VALBH, President 4/10/97 (407) 578-1959

Date

Daytime Phone #

CR2E034 (9/96)