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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P93000086619 (2)

PLETHORA INVESTMENTS OF NORTH FLORIDA, INC.

GAINESVILLE FL 32601 US   GAINESVILLE FL 32601-4321 US   3. Date Incorporated or Qualified   12/20/1993   03/25/1996	Principal Place	e of Business	Mailing Address		······································			
2. Principal Place of Sustained   2a. Making Address   2b. Making Addr	GAINESVILLE F					·		
Suit   April   February   Suit   Su	US							•
Solicy April 4, rect   20   20   21   21   22   22   23   24   25   25   25   25   25   25   25	·	ace of Business	2a. Mailing Address				A	Applied For
City & Suits  City & Status  City & Country  Page   Countr		In the second se						
Cly 6 Salet   Cly 6 Salet   28   Cly 6 Salet   29   29   County   8. This copporation has hability for intergible tax under it 199 .022, 24   29   29   30   This copporation has hability for intergible tax under it 199 .022, 24   29   28   Salet   29   29   29   Salet   29   29   29   Salet   29   29   29   Salet   29   29   29   29   29   29   29   2	·			·				
28				· · · · · · · · · · · · · · · · · · ·				
Zep								
BEVER IV, PHIL C. J 912 NE 2ND STREET GAINESVILE FL 32801  80  81 Name  82 Street Address (P.O. Box Numbor is Not Acceptable)  83 Street Address (P.O. Box Numbor is Not Acceptable)  84 City  85 Street Address (P.O. Box Numbor is Not Acceptable)  86 City  87 Street Address (P.O. Box Numbor is Not Acceptable)  87 Street Address (P.O. Box Numbor is Not Acceptable)  88 Street Address (P.O. Box Numbor is Not Acceptable)  89 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  81 Name  82 Street Address (P.O. Box Numbor is Not Acceptable)  83 Street Address (P.O. Box Numbor is Not Acceptable)  84 City  85 Street Address (P.O. Box Numbor is Not Acceptable)  85 Street Address (P.O. Box Numbor is Not Acceptable)  86 City  87 Street Address (P.O. Box Numbor is Not Acceptable)  87 Street Address (P.O. Box Numbor is Not Acceptable)  88 Street Address (P.O. Box Numbor is Not Acceptable)  89 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  81 Numbor is Not Acceptable)  82 Street Address (P.O. Box Numbor is Not Acceptable)  83 Street Address (P.O. Box Numbor is Not Acceptable)  84 Street Address (P.O. Box Numbor is Not Acceptable)  85 Street Address (P.O. Box Numbor is Not Acceptable)  86 City  86 City  87 Street Address (P.O. Box Numbor is Not Acceptable)  86 City  87 Street Address (P.O. Box Numbor is Not Acceptable)  87 Street Address (P.O. Box Numbor is Not Acceptable)  88 Street Address (P.O. Box Numbor is Not Acceptable)  89 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  80 Street Address (P.O. Box Numbor is Not Acceptable)  81 Street Address (P.O. Box Numbor is Not Acceptable)  82		Country	Zip	Country	1	8. This corporation has liability fo	r intangible tax under	s. 199.032,
BEVERLY, PHIL C. J 912 NE 2ND STREET GAINESVILLE FL 32801  80  64 City FL 85 Zip Code  64 City FL 85 Zip Code  65 City FL 85 Zip Code  66 City FL 85 Zip Code  67 City FL 85 Zip Code  68 City FL 85 Zip Code  69 City FL 85 Zip Code  69 City FL 85 Zip Code  69 City FL 85 Zip Code  60 City FL 85 Zip Code  61 City FL 85 Zip Code  62 City FL 85 Zip Code  63 City FL 85 Zip Code  64 City FL 85 Zip Code  65 City FL 85 Zip Code  66 City FL 85 Zip Code  67 City FL 85 Zip Code  68 City FL 85 Zip Code  69 City FL 85 Zip Code  60 City FL 85 Z	24	· · · · · · · · · · · · · · · · · · ·		30				
POLY STAPE  GAINESVILLE FL 32801  82 Stroot Address (P.O. Box Number is Not Acceptable)  83 Stroot Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Forida Statutes. In a above-named corporation submits this statement for the purpose of changing its registered open. I am first and its deceptable obligations of Section 607.0502 and 607.1508. Forida Statutes. In a above-named corporation submits this statement for the purpose of changing its registered open. I am first an interference deceptable obligations of Section 607.0505. Forida Statutes.  SIGNATURE  12. OF HICRS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TRINITY, STEPHENAS  15. RADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. RADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. TRINITY, STEPHENAS  17. RADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. TRENTON FL 32883  18. SIRECT ADDIESS  18. TRENTON FL 32883  18. SIRECT ADDIESS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. TRENTON FL 32883  18. SIRECT ADDIESS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. SIRECT ADDIESS  18. SIR			nt Registered Agent		I ii	10. Name and Address of New F	egistered Agent	
GAINESVILLE FL 32601  64 City  FL 95 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 807.1508. Frontise Statutes, the above-named corporation submits this statement for the purpose of changing its registered open. Let nitrate with, and accept the obligations of Section 67.0505, Floridas Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered open. Let nitrate with, and accept the obligations of Section 67.0505, Floridas Statutes.  SIGNATURI  SIGNATURI  12. OF FICE RS AND DIRE CTORS  13. ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12  TRINITY, STEPHENAS  ROUTE 1, BOX 241  13. SIREF ADDRESS  13. ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12  TRENTON FL 32693  14. City: St. 2/P  TRENTON FL 32693  14. City: St. 2/P  TRENTON FL 32693  DELETE  2.1 TILE  Change Addition  TRENTON FL 32693  DELETE  3.1 TILE  Change Addition  Addition  TRENTON FL 32693  DELETE  3.1 TILE  Change Addition  TRENTON FL 32693  DELETE  3.1 TILE  Change Addition  Addition  TRENTON FL 32693  DELETE  3.1 TILE  Change Addition  Change Addition  Addition  TRENTON FL 32693  DELETE  3.1 TILE  Change Addition  Change Addition  Change Addition  Change Addition  TRENTON FL 32693  DELETE  3.1 TILE  Change Addition  Change Additi				81	Name			
63   64   City   FL   85   Zip Code				82	Street Add	iress (P.O. Box Number is Not Accepta	able)	
11. Fursion to the previsions of Sections 607.0502 and 607.1508. Floride Statutes the above-harmed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floride Statutes. The above-harmed corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floride Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  DEFECTIONS  12. OF FICE RIS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TRINITY, STEPHENAS  ROUTE 1, BOX 241  TRENTON FL 32893  13. STREET ADMESS  FLORIDA TO TRINITY, STEPHENAS  ROUTE 1, BOX 241  TRENTON FL 32893  DELETE  1.1 TITLE  1.2 TRINITY, SARAH  2.2 NAME  2.2 NAME  2.2 NAME  3.3 STREET ADMESS  SIGNATURE  DELETE  1.1 TITLE  1.1	GAII	NESVILLE FL 32601		83				
TRINITY, STEPHENAS ROUTE 1, BOX 241 TRENTON FL 32893 TREN				03				
office or presentated agent, or both, in the State of Fonds Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Fonds Statutes.  SIGNATURE  SIGNATURE  12. OF INCERS AND DIFFECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  TRINITY, STEPHENAS  ROUTE 1, BOX 241  13. TREAT ADDRESS  ROUTE 1, BOX 241  13. STREET ADDRESS  ROUTE 1, BOX 241  13. TREAT ADDRESS  ROUTE 1, BOX 241  13. STREET ADDRESS  ROUTE 1, BOX 241  14. STREET ADDRESS  ROUTE 1, BOX 241  15. STREET A			·	84	City		85 Zir	Code
office or presentated agent, or both, in the State of Fonds Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Fonds Statutes.  SIGNATURE  SIGNATURE  12. OF INCERS AND DIFFECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12  TRINITY, STEPHENAS  ROUTE 1, BOX 241  13. TREAT ADDRESS  ROUTE 1, BOX 241  13. STREET ADDRESS  ROUTE 1, BOX 241  13. TREAT ADDRESS  ROUTE 1, BOX 241  13. STREET ADDRESS  ROUTE 1, BOX 241  14. STREET ADDRESS  ROUTE 1, BOX 241  15. STREET A	11 Pursuant t	to the provisions of Sections 607.05	02 and 607 1508 Florida Statute	s the abov	e-named cor	poration submits this statement for the	purpose of changing	its registered
SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTE DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITAINITY, STEPHENAS ROUTE 1, BOX 241 ITAINITY, STEPHENAS ROUTE 1, BOX 241 ITAINITY, SARAH ROUTE 1	office or re	egistered agent, or both, in the Stati	e of Florida Such change was a	uthorized by	the corpora	ation's board of directors. I hereby acc	apt the appointment a	s registered
12. OFFICERS AND DIFFCTORS IN 3. ADDITIONS/CHANGES TO OFFICERS AND DIFFCTORS IN 12.  INTEL OFFICERS AND DIFFCTORS IN 12.  INTEL ADDITIONS TEPHENAS I 1.3 KREET ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  TRENTON FL 32893  DELETE 21 TILE 22 STREET ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 31 TILE 22 STREET ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 31 TILE 31 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 31 TILE 31 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE 4 CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 41 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 51 TILE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 61 TILLE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  DELETE 61 TILLE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  TRENTON FL 32893  DELETE 61 TILLE CHANGE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  TRENTON FL 32893  TRENTON FL 32893  DELETE ADDRESS  CHI-SI-ZIP  TRENTON FL 32893  TRENTON FL 3		ra iarniliar with, and accept the obily	jailons or, section 607,0505, Fib	ricia Statute	5.			
TRINITY, STEPHENAS		Standard type for profed harno of registered ag	gent and tice if applicable (NOTE	Registered Agr	ent signature requ	uired when reinstaling)	DATE	
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THE DELETE 4.1 TITLE Change Addition  MAY  STREET ADDRESS  CITY - ST - 7/P  THLE DELETE 5.1 TITLE Change Addition  MANL  STREET ADDRESS  CITY - ST - 7/P  HILE DELETE 5.1 TITLE  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Final Change Addition  Addition  Addition  Addition  Addition  Final Change Addition  Addition  Addition  Addition  Addition  Final Change Addition  Add	\ \ \							
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CITY-S1-78*  A 4 CITY-ST-ZIP  DELETE  51 TITLE  S1 TITLE  Change Addition  52 NAME  STREET ADDRESS  CITY-S1-78*  FILE  DELETE  DELETE  6.1 TITLE  Change Addition  62 NAME  STREET ADDRESS  CITY-S1-ZIP  CITY-S1-ZIP  1. Cic 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	NAME .			4. 2 NAME				İ
THE DELETE 51 THE Change Addition  NAME STRICT ADDRESS CATY-ST-ZIP  THE DELETE 51 THE Change Addition  52 NAME 53 STREET ADDRESS 64 CITY-ST-ZIP  Change Addition  62 NAME SREET ADDRESS CITY-ST-ZIP  14. I do hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that	STREET ADDRESS		(	4 3 STREET	ADDRESS			
STREET ADDRESS  CATY- \$1-7P  THE  DELETE  6.1 TITLE  Change Addition  6.2 NAME  STREET ADDRESS  CITY- \$1-2IF  1. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that	CITY - S1 - ZiP			4.4 CITY-5	ST-2(P			
STREET ADDRESS CATY-ST-ZIP FILE DELETE 6.1 TITLE Change Addition  6.2 NAME SIREEL ADDRESS CITY-ST-ZIP  1. I do hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that	DILE		DELETE	51 TITLE			☐ Change	Addition Addition
SA CITY-ST-ZIP   SA CITY-ST-ZIP   SA CITY-ST-ZIP   SA CITY-ST-ZIP   SA CITY-ST-ZIP   STREET ADDRESS   SA STREET ADDRESS   SA STREET ADDRESS   SA CITY-ST-ZIP	NAME			5.2 NAME				
THE DELETE 6.1 TITLE Change Addition  NAME STREET ADDRESS CITY ST-ZIF  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 Statules. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that	STREET ACIDRESS			5.3 STREET	ADDRESS			
Street Address City Strate  6.2 NAME 6.3 STREET ADDRESS City Strate 6.4 City Strate 6.4 City Strate 6.5 STREET ADDRESS 6.4 City Strate 6.5 STREET ADDRESS 6.6 City Strate 6.6 City Strate 6.7 City Strate 6.8 City Strate 6.9 NAME 6.9 STREET ADDRESS 6.9 City Strate 6.9 City Strate 6.9 STREET ADDRESS 6.9 City Strate 6.9 City Strate 6.9 STREET ADDRESS 6.9 City Strate 6.9 City Strate 6.9 City Strate 6.9 City Strate 6.9 STREET ADDRESS 6.9 City Strate 6	h		100		ST-ZIP		T 45	The section
Sheat Address  City Strip  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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that			TT DEFEIF	1			Unange	L Addition
CITY-ST-ZIF  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					. Annest			
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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		ay certify that the information supplied	ed with this filing riges not qualif			ed in Section 119 07(3)(i). Florida Statu	les. I further certify the	at the
	informatio	ri indicated on this annual report or	supplemental annual report is tr	ue and acci	urate and tha	at my signature shall have the same leg	gal effect as if made u	inder oath; that