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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS						Secretary of State	
DOCUI 1. Corporatio			088019	(3)			
Principal Plac 2487 HIGHWA MIDDLEBURG	Y 220		Mailing Address 2487 HIGHWAY 220 MIDDLEBURG FL 32088				
US			U\$				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
9 Principal P	lace of Business		2a. Mailing Addre	100			01/01/1994 4. FEI Number Applied For
2, Frincipari 21	Ido e Of Dosifiess		26	100			4. FEI Number Applied For S9-3228961 Not Applical
Suite, Apt.	#, etc.		Suite, Apt. #,	et¢.			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	9		City & State		·····		6. Election Campaign Financing \$5.00 May Be
23			28	 -			Trust Fund Contribution Added to Fees
Zip 24	25	ountry	Zip	3(Country	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and A	ddress of Current		3			10. Name and Address of New Registered Agent
WHITMORE, JOHN T					81	Name	,
2487 HIGHWAY 220 MIDDLEBURG FL 32068						Street A	t Address (P.O. Box Number is Not Acceptable)
					83		
					84	City	85 Zip Code
11. Pursuant I	to the provisions of	Sections 607.0502	and 607.1508, Florid	a Statutes.	, the above	e-named (d corporation submits this statement for the purpose of changing its registers
office or re agent. I a	egistered/agovit or m familiar/with and	both, in the State of accept the obligation	Morida. Such chang is of, Section 607.0	je was auti 505, Floric	horized by da Statutes	the corp	d corporation submits this statement for the purpose of changing its registere reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	ikh	14			•	JOHN	U T. WHITMORE PRESIDENT JAN 20.1998 Te required when reinstating) DATE
12.	Standure hyped or printer	OFFICERS AND	DIRECTORS	(NOTE H	13.	ni signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P P	01 IN 7	DEL	ETE	1.1 TITLE		Change Additi
NAME STREET ADDRESS	WHITMORE, J 2487 HIGHWA				1.2 NAME 1.3 STREET	ADDDECC	
CITY-ST-ZIP	MIDDLEBURG				1.3 STREET	1	1
TITLE	VP		☐ DEL	ETË	2.1 TITLE		☐ Change ☐ Additi
NAME	WHITMORE, P 2487 HIGHWA				2.2 NAME		
STREET ADDRESS CITY-ST-ZIP	MIDDLEBURG				2.3 STREET . 2. 4 CITY - S	1	
TITLE		<u>· </u>	☐ DEL	ETÉ	3.1 TITLE	11-211	Change Additi
NAME					3.2 NAME		
STREET ADDRESS					3.3 STREET		
CITY-ST-ZIP	T T		na l		3.4. CHTY-S		Change Additi
THE STORESS				***	4. 2 NAME		
CITY-ST-ZIP				- 4 -	4.3 STREET 4.4 CITY - S	1	
NAME			☐ DE	ETE	5.1 TITLE	-	Change Additi
STREET ADDRESS					5.2 NAME	- 1	
CITY-ST-ZIP	·				5.3 STREET . 5.4 CITY - ST	1	}
NAME			☐ DEL	ETE	6.1 TITLE	1-2/1	☐ Change ☐ Addition
STREET ADDRESS					6.2 NAME	- 1	J Viningo Addulli
CITY-ST-ZIP			_		6.3 STREET A		
 I hereby of indicated of 	ertify that the inform	nation supplied with	this thing does not a	ualify for th	6.4 CITY-ST	·ZIP	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information gnature shall have the same legal effect as if made under ceth; that them on
officer or o Block 12 o	firector of the corpor Block 13 if chang	ration or the receive ed, or on in atlachr	rinival/report is true a er or trustee empowe pent with an address	nd accura red to exe	ite and that oute this re	t my sign eport as r	I ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information gnature shall have the same legal effect as if made under oath; that I am an a required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

FILED

Feb 23 1998 8:00am