1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000088227

Corporation Name

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90143 020 ***150.00

Principal Place of Business WINTER PARK P. 3278, 9. 215 N. EOLA DRIVE ORANBO FI. \$2801 22 S. D. DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 12/28/19393 2. Principal Place of Business 2a. Mailing Address 21	2. Principal Plac 2. Principal Plac 21 Suite, Apt. #, 22 City & State 23 Zip 24	2782 45 ce of Business	215 N. EOLA DRIVE ORLANDO FL 32801 2a. Mailing Address 26				DO NOT WRITE IN THIS		
### SPANCE - NR FL 3279, \$2 WINTER PARK FL 3279, \$2 25 N ECIA DRIVE ORLANDO FL 32801 2. Principal Pluce of Business 2. Mailing Address 2. Mailing Address 3. Date incorporated or Qualifed 12/28/1993 4. FEI Number Applied For Not Applicable \$3.05 Not Applicable \$3.05 N ECIA DRIVE Applied For Not Applicable \$4.05 N ECIA DRIVE Applied For Not Applicable \$5.00 May Ba Added for Ecia Drive Applied For Not Added for Fee Not Added for Fe	2. Principal Plac 2. Principal Plac 21 Suite, Apt. #, 22 City & State 23 Zip 24	2782 45 ce of Business	215 N. EOLA DRIVE ORLANDO FL 32801 2a. Mailing Address 26					SPACE	
2. Principal Place of Business	21 Suite, Apt. #, 22 City & State 23 Zip 24 JOHNS		26						
2. Principal Place of Business	21 Suite, Apt. #, 22 City & State 23 Zip 24 JOHNS		26				i a. Date ilicologiated di Qualiteu	•	<u> </u>
2. Principal Place of Business	21 Suite, Apt. #, 22 City & State 23 Zip 24 JOHNS		26				! ·		
Suite, Apt. #, etc. Suite, Apt. #, etc.	21 Suite, Apt. #, 22 City & State 23 Zip 24 JOHNS		26					App	olied For
Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 27 City & State	Suite, Apt. #, 22 City & State 23 Zip 24 JOHNS	etc.	. 				59-3218772	Not	Applicable
22 27 27 27 28 State City & State Cit	22 City & State 23 Zip 24 JOHNS		<u> </u>				<u>_</u>		
City & State State City & State	City & State 23 Zip 24 JOHNS		27				.5.«Certificate of Status Desired	Fee Rec	quired
Zip	Zip 24 JOHNS						6. Election Campaign Financing	\$5.00	May Be.
Zip Country 2ip Country 2ip Country 2ip Country 8. This corporation owes the current year intengible Personal Property Tax.	Zip 24 JOHNS		28				Trust Fund Contribution	Added to	Fees
3. Name and Address of Current Registered Agent JOHNSON, LORAN A 215 N EOLA DR ORLANDO FL 32801 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 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, 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, 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, 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, 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, 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, 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, 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, or both agent agent and accept the obligation of Science State agent and accept the obligation of Science Addition agent and accept the obligation of Science Addition agent and accept the obligation of Science Addition agent agent and accept the obligation of Science Addition agent agent and accept the appointment as registered agent and accept the appointment agent agen	JOHNS	Country	Zip	Соиг	ntry		8. This corporation owes the current year In		_
JOHNSON, LORAN A 215 N EOLA DR ORLANDO FL 32801 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and time if applicable. ITTLE DELL, JOHN MARTIN 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELL, JOHN MARTIN 12. AVMME BELL, JOHN MARTIN 12. TITLE DELETE 13. STREET ADDRESS WINTER PARK FL 32789 14. GITY-ST-ZP WINTER PARK FL 32789 DELETE 23. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 32789 DELETE 31. TITLE 31. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 32789 DELETE 31. TITLE 31. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 32789 DELETE 31. TITLE 31. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 32789 DELETE 31. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 32789 DELETE 31. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 32. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 33. STREET ADDRESS CITY-ST-ZP WINTER PARK FL 34. City	JOHNS			30			1		□No
JOHNSON, LORAN A 215 N EOLA DR ORLANDO FL 32801 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 arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE DELETE 1.2 ADMIT DIRECTORS IN 12 1.2 YAME STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 TITLE SCHOO, INGRID L STREET ADDRESS GTS-ST-ZIP WINTER PARK FL STREET ADDRESS GTS-ST-ZIP WINTER PARK FL STREET ADDRESS GTS-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition Addition STREET ADDRESS GTS-ST-ZIP WINTER PARK FL STREET ADDRESS 4.3 STREET ADDRESS		9. Name and Address of Curre	nt Registered Agent		1		10. Name and Address of New Registered	Agent	
215 N EOLA DR ORLANDO FL 32801 82 Street Address (P.O. Box Nullinger 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 agent, are familiar with, and accept the obligations of, Section 607.0505, Floridad Statutes. SIGNATURE Signature, typed or protect name of registered agent and utile if approximate a segistered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE D DELETE 1.1 TITLE Change Addition NAME SIELL, JOHN MARTIN 1.2 YAME SIECET ADDRESS 1.3 STREET ADDRESS CITY.ST-ZIP WINTER PARK FL 32789 1.4 CITY.ST-ZIP Change Addition SIECET ADDRESS CITY.ST-ZIP DELETE 2.1 TITLE Change Addition SIECET ADDRESS CITY.ST-ZIP DELETE 3.1 TITLE Change Addition SIECET ADDRESS CITY.ST-ZIP Change Addition					81	Name			
ORLANDO FL 32801 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 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 607.0503, Florida Statutes. SIGNATURE Signature, Typed or permised name of registered agent and site if apprictable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D GELETE 1.1 TITLE DELETE 1.1 TITLE DELETE 1.2 TITLE DELETE 1.3 STREET ADDRESS WINTER PARK FL V DELETE 2.2 NAME STREET ADDRESS 2.2 STREET ADDRESS CITY-ST-ZIP WINTER PARK FL V DELETE 3.2 STREET ADDRESS CITY-ST-ZIP WINTER PARK FL Change Addition Addition Change Addition Addition Change Addition Addition Change Addition Addition Change Addition Change Addition Change Addition Addition Addition Addition Addition Addition Change Addition Change Addition Addi	! 215 N			ŀ	82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
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 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 name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 12.				Į					
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 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pretted name of registered agent and title if applicable.	ORLAN	NDO FL 32801			83				}
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 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, and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, Typed or pented name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DBELL, JOHN MARTIN 12 NAME STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 14 CITY-ST-ZIP DELETE 1.1 TITLE DC Change Addition Addition STREET ADDRESS CITY-ST-ZIP TITLE V DELETE 3.1 TITLE V NAME SCHOO, INGRID L STREET ADDRESS CITY-ST-ZIP TITLE V NAME SCHOO, INGRID L STREET ADDRESS WINTER PARK FL 3.2 STREET ADDRESS WINTER PARK FL 3.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition Addition Addition Addition Addition Addition Addition Addition AME STREET ADDRESS WINTER PARK FL DELETE 4.1 TITLE AME STREET ADDRESS STREET ADDRESS WINTER PARK FL 3.3 STREET ADDRESS WINTER PARK FL 3.4 STREET ADDRESS WINTER PARK FL Change Addition Addition Addition Addition AME STREET ADDRESS				}	84	City		85 Zip C	ode
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Doard of directors. Thereby accept the applications of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITITLE D DELETE 1.1 TITLE D DELETE 1.1 TITLE D DELETE 1.1 TITLE D DELETE 1.1 TITLE D TITLE PST DELETE 1.1 TITLE PST DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.2 NAME STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 1.2 STREET ADDRESS CITY-ST-ZIP TITLE V DELETE 3.1 TITLE Change Addition Addition Addition Change Addition Addition Addition NAME SCHOO, INGRID L STREET ADDRESS CITY-ST-ZIP TITLE V DELETE 3.1 TITLE Change Addition Addition Addition Addition NAME SCHOO, INGRID L STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition Addition Addition Addition NAME STREET ADDRESS STREET ADDRESS WINTER PARK FL 3.2 NAME STREET ADDRESS WINTER PARK FL 3.3 STREET ADDRESS WINTER PARK FL 3.4 CITY-ST-ZIP TITLE Change Addition Addition AMME STREET ADDRESS WINTER PARK FL 3.4 CITY-ST-ZIP TITLE Change Addition Addition Addition AMME STREET ADDRESS WINTER PARK FL 3.4 CITY-ST-ZIP TITLE Change Addition Addition Addition AMME STREET ADDRESS						named some	ration submits this statement for the nurnose of	= } f changing its :	registered
Signature, lyoed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) UNTE	office or roa	aictored agent or both in the State	e of Florida. Such change was .	authorized	hv:	the corporation	's board of directors. I hereby accept the appo	intment as reg	jistered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D D DELETE 1.1 TITLE	SIGNATURE	Separative typed or printed name of registered an	ent and title if applicable (NOT	E: Registered /	Ageni	t signature required	when reinstating) DATE		 [
TITLE D D DELETE 1.1 TITLE D Change Addition NAME BELL, JOHN MARTIN 12 NAME STREET ADDRESS 1215 ORANGE AVE WINTER PARK FL 32789 14 CITY-ST-ZIP TITLE PST DELETE 2.1 TITLE DELETE 2.1 TITLE NAME BELL, JOHN MARTIN 22 NAME STREET ADDRESS 1215 ORANGE AVE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP TITLE V DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.2 NAME SCHOO, INGRID L 32 NAME STREET ADDRESS 675 OSCEOLA AVENUE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE VINTER PARK FL 32789 3.4 CITY-ST-ZIP TITLE DELETE 3.4 TITLE DELETE 4.1 TITLE DELETE 4.1 TITLE DELETE 4.2 NAME STREET ADDRESS 4.3 STREET ADD								ND DIRECTOR	RS IN 12
NAME STREET ADDRESS CITY-ST-ZIP TITLE PST STREET ADDRESS CITY-ST-ZIP TITLE PST STREET ADDRESS CITY-ST-ZIP TITLE PST STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE V NAME STREET ADDRESS CITY-ST-ZIP TITLE V NAME SCHOO, INGRID L STREET ADDRESS CITY-ST-ZIP TITLE SCHOO, INGRID L STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS				1,1 TITI	LE			Change	Addition
STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 TITLE PST NAME BELL, JOHN MARTIN STREET ADDRESS CITY-ST-ZIP WINTER PK FL 32789 1.1 STREET ADDRESS CITY-ST-ZIP WINTER PK FL 32789 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP WINTER PK FL 32789 2.4 CITY-ST-ZIP TITLE V DELETE 3.1 TITLE SCHOO, INGRID L 3.2 NAME STREET ADDRESS CITY-ST-ZIP WINTER PARK FL DELETE 3.4 CITY-ST-ZIP TITLE AL CITY-ST-ZIP Change Addition Addition Addition AL CITY-ST-ZIP TITLE AL CITY-ST-ZIP TITLE AL CITY-ST-ZIP TITLE AL CITY-ST-ZIP TITLE AL CITY-ST-ZIP Addition Addition AL CITY-ST-ZIP ADDRESS ADDRESS AL CITY-ST-ZIP ADDRESS ADDRES	1 1 -	_		1.2 NA	ME				1
CITY-ST-ZIP	l I .	· · · · · · · ·		1.3 STF	REET	ADDRESS			1
TITLE PST DELETE 2.1 TITLE	1			, 14 CIT	Y-SI	T-ZiP			
NAME BELL, JOHN MARTIN 22 NAME STREET ADDRESS CITY-ST-ZIP WINTER PK FL 32789 2.4 CITY-ST-ZIP Change Addition TITLE V CHANGE AVENUE 33 STREET ADDRESS CITY-ST-ZIP CHANGE STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32 NAME 33 STREET ADDRESS WINTER PARK FL 34. CITY-ST-ZIP TITLE CHANGE ADDRESS ALCITY-ST-ZIP CHANGE Addition DELETE 4.1 TITLE CHANGE Addition Addition NAME STREET ADDRESS 4.3 STREET ADDRESS STREET ADDRESS 4.3 STREET ADDRESS STREET ADDRESS 4.3 STREET ADDRESS ADDRESS 4.3 STREET ADDRESS			☐ DELETE					Change	Addition
STREET ADDRESS CITY-ST-ZIP WINTER PK FL 32789 TITLE V SCHOO, INGRID L STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32 STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 33 STREET ADDRESS WINTER PARK FL 34 CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS A CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS A STREET ADDRESS	I I			2.2 NA	ME	1			
CITY-ST-ZIP				23 ST	REET	ADORESS			
TITLE	1 1,			1			سراسينيون والماريني المارين المارين		ج جرحه و د
NAME	· .		☐ DELETE	_				Change	☐ Addition
STREET ADDRESS 675 OSCEOLA AVENUE 33 STREET ADDRESS CITY- ST-ZIP WINTER PARK FL 34. CITY- ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS	\ <u></u>	•		32 NA	ME		-		
CITY-ST-ZIP 34.CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS				3 3 ST	REET	TADDRESS			
TITLE				34. CI	TY-S	ST-ZIP			ì
NAME STREET ADDRESS 4.2 NAME 4.3 STREET ADDRESS	<u> </u>	110111111111111111111111111111111111111	☐ DELETE	_				Change	Addition
STREET ADDRESS 4.3 STREET ADDRESS	i 1			4. 2 NA	AME		•		Ļ
1	1			4.3 STI	REET	TADORESS			
1 1117-31-79€ 1 = 7/3 Q(11 Q(12))	CITY-ST-ZIP			1					
	1		☐ DELETE					☐ Change	Addition
NAME 5.2 NAME	1								
STREET ADDRESS 5.3 STREET ADDRESS	1			5.3 STI	REET	TADDRESS			
CITY-ST-ZIP 54 CITY-ST-ZIP	1								
TITLE DELETE 61 TITLE Change Addition					ry-s	T-ZIP			
	i l		☐ DELETE	5.4 CIT		T-ZIP		Change	Addition
NAME 6.2 NAME	STREET ADDRESS		☐ DELETE	5.4 CIT 6 1 TIT	l.E	T-ZIP		Change	Addition

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 corporation of 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 an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF EIGNING OFFICER OR DIRECTOR

Date Daylime Phone #

R2E034 (11/98)