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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400004853 (5)

LOCKHART SERVICE CENTER, INC.

FILED Mar 04 1997 8:00am Secretary of State



Principal Pac	e of Business	Mailing Address		····			
218 E INTERLA LAKE PLACID F	KE BLVD	218 E INTERLAKE BLVD LAKE PLACID FL 33852-90	60 3				
					3. Date Incorporated or Qualified 01/10/1994	3a. Date of Last F 04/23/1996	Report
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	A	pplied For
21		26			65-0460128 Not Applicable		
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23	••	28			Trust Fund Contribution		o May be to Fees
2 φ	Country	Zip	Count	lry	8. This corporation has liability for		
24	25	29	30			Yes No	
	9, Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	glatered Agent	
GRA	Y, W. M.		8	Name De	OUGLAS W. C	LOCK HAR	27
	B INTERLAKE BLVD		8	2 Street Add	ress (P.O. Box Number is Not Acceptal	(S) 0110	
LAKI	E PLACID FL 33852		<u> </u>	3	H8 E INTERCAR	e peru	
			1	2			
			6	4 City	AKE PLACIO	E1 85 Zip	Code
11 Pursuant	to the movisions of Sections 607	0502 and 607 1508. Florida Statu	ites the abo	ve-named cor	poration submits this statement for the r	Durnose of changing	its registered
office or r	reg stered agent, or both, in the S am familiar with, and accept the of	state of Florida. Such change was	authorized	by the corpora	poration submits this statement for the plon's board of directors. I hereby acce	pt the appointment as	registered
			TORIOR Statut	es.	las II) Kin lala a	- 🖟 2128	197
SIGNATURI	POUGLAS W LOC Signature, typed or purched name of registere	id agent and title if applicable (NC	TE Registered /	Agent signature redu	ired when reinstating)	DATE	111
12.	OFFICE RS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12
1(b),F	DP	DELETE	1.1 TITU		PRESIDENT	★ Change	Addition
NAME	LOCKHART, DOUGLAS F	, .	1.2 NAM	IE d	DYCENE LOCK THR.	4000	
STREET ADDRESS	218 E INTERLAKE BLVD		1.3 STRE	EET ADDRESS	LAKE PLACE, FL)	
CHTY ST-ZIF	LAKE PLACID FL 33852			-ST-ZIP	LAKE PLACE, FL	3583	
TITLE	DV	☐ DELETE	2.1 TITU	E		Change	Addition
NAMt	LOCKHART, DOUGLAS W		2.2 NAM	.			
STREET ADDRESS	218 E INTERLAKE BLVD LAKE PLACID FL 33852			EET ADDRESS			
CHY-SL-ZIP	DST	DELETE		Y-\$T-ZIP		Change	Addition
THLE	LOCKHART, WYLENE	☐ prreit	3.1 TITLE 3.2 NAM	ſ		L Change	FT VOUNDE
STREET (ADDRESS	218 E INTERLAKE BLVD			EET ADDRESS			
CITY-ST-ZIP	LAKE PLACID FL 33852			Y-ST-ZIP			
THILE		DELETE	4.1 1111			Change	Addition
NAME	}		4. 2 NAN	AE		•	
STREET ADDRESS			I.				
CITY-ST-ZIF			4.3 5 103	EET ADDRESS			
				EET ADDRESS ST-ZIP			
TOTAL		DELETE		-ST-ZIP		Change	Addition
		DELETE	4.4 City	-ST-ZIP E		Change	Addition
TITLE		☐ DELETE	4.4 CHY 51 THL 52 NAM	-ST-ZIP E		Change	☐ Addition
NAME STREET ADDRESS CITY: \$1, 722			4.4 City 51 Titul 52 NAM 53 STRE	E E			
TITLE NAME STREET ADDRESS		DELETE	4.4 City 51 Titul 52 NAM 53 STRE	- ST - ZIP E IE EET ADDRESS - ST - ZIP		Change	Addition Addition
NAME STREET ADDRESS CITY: ST. 722			4.4 CITY 51 TITLI 52 NAM 53 STRE 54 CITY	- ST - ZIP E IE EET ADDRESS - ST - ZIP E			
TITLE NAME STREET ADDRESS CITY- ST. Z/P TITLE			4.4 CHY 5.1 TITLI 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TITLI 6.2 NAM	- ST - ZIP E IE EET ADDRESS - ST - ZIP E			

Too hearty carry that the information supplied with this 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 12 changed, or In an attachment with an address.

SIGNATURE: