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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000014791 (5)

MADDOCKS ENTERPRISES OF VENICE, INC.

Principal Place of Business Mailing Address) HODINOON HEN LOTAL OF BILL BONN BONN BONN BONN BONN HONE ON HEN LEGEN TOWN THE HEN HEN LIBER	
1144 DEARDON DR VENICE FL 34292	1144 DEARDON DR VENICE FL 34292-3141				
				3. Date Incorporated or Qualified 02/21/1994	3a. Date of Last Report 03/15/1996
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc			65-0458090	Not Applicable
22	27 Suite, Apr. #, 6to			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	☐ Added to Fees
Zip Country	Zip	Country	′	8. This corporation has liability for it	
24 25 9, Name and Address of Curren	129	30			Yes Y No
	t negistered Agent	81	Name	10. Name and Address of New Reg	Jistered Agent
BOONE, JEFFREY A 1001 AVENIDA DEL CIRCO		Ů,	INAMIC		
VENICE FL 34285		82	Street Add	ress (P.O. Box Number is Not Acceptab	e)
VEHICE PL 34203		83			
		84	City		FL 85 Zip Code
 Pursuant to the provisions of Sections 607.050, office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga- 	of Florida, Such change was a	authorized b	/ the corpora	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered
SIGNATURE Signature type of de-printed in the of registrated age.			 		
12. OFFICERS AND		13.	ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
TITLE PD	DELETE	1 1 TITLE		ADDITIONOLIANOES TO OTHER	Change Addition
NAME MADDOCKS, SEWALL T JR		12 NAME			
STREET ADDRESS 1144 DEARDON DR		1 3 STREET	ADDRESS		
CITY-S1-ZIP VENICE FL 34292		1.4 CITY-5	IT-ZIP		
TITLE STD	☐ DELETE	2 1 TITLE		***************************************	Change Addition
NAME MADDOCKS, BETTY J		22 NAME			
STREET ADDRESS 1144 DEARDON DR		2 3 STREET	ADDRESS		
CITY-S1-ZIP VENICE FL 34292		2 4 CITY-	ST-ZIP		
TITLE	☐ DELETE	3 1 TITLE			Change Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET	ADDRESS		
CITY-ST-7IP	T OF LETC	3.4. CITY -	S1-ZIP	W-1-1	
DILE	☐ DELETE	4.1 TITLE			Change Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET	1		
CITY-ST-7P TITLE	DELETE	4.4 CITY - S	T-ZIP		Change
NAME		5.1 TITLE			Change Addition
SFREET ADDRESS		5.2 NAME	LARREDO		
		5.3 STREET			
COLY-ST-20F	DELETE	5.4 CHTY-S 6.1 TITLE	1-614		Change Addition
NAME	occ	6.2 NAME			C Outside C Votinger
STREET ADDRESS		6.3 STREET	ADDRESS		

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