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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

KELSIE'S ULTRASONIC BLIND CI Principal Place of Business  1683 BOMI CIRCLE WINTER PARK F 32792	Mailing Address 1683 BOMI CIRCLE WINTER PARK FL 32792-63	16		
US	US		3. Date Incorporated or Qualified 03/18/1994	3a. Date of Last Report 03/14/1996
2. Principal Place of Business	2a. Mailing Address	<del></del>	4. FET Number	Applied For
21	26		59-3231344	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23	28		Trust Fund Contribution	Added to Foos
Zip Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes	r intangible tax under s. 199.032,
9. Name and Address of Curr			10. Name and Address of New R	
243 TALLWOOD DR GASSELBERRY FL 32707  11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Siz	ite of Florida. Such change was a	84 Cily S.s. the above-named could orized by the corpor	AND WRIGHT  press (P.O. Box Number is Not Accepted BOM CIRCLE  TER PALK  reporation submits this statement for the ation's board of directors. I hereby accepted the process of the page of the statement of the ation's board of directors.	FL 85 Zip Code Z
SIGNATURE Signature, typed or profited name of registered	accept and latical accept cable (NCV)	Registered Agent signature req	u cod when constaling	DATE
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE D	DELETE.	1111111	·	Change Addition
NAME WRIGHT, DAVID STREET ADDRESS 243 TALLWOOD DRIVE		12 NAME	AUID WRIGHT	
CASSELBERRY FL 32707		13 STREET ADDRESS LA	683 BOMI CIE. DINTER PACK, FL 32	797~
TITLE	DELETE	2 1 1/11		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	Divien	2 4 CITY - \$1 - 7IP	••••	
TITLE	L_ DELETE	3 1 THILE 32 NAME		Change Addition
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		3 4. CITY - S1 - ZIP		
TITLE	DELETE	417000		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	D Driege	4 4 CITY - ST - 7IP		(1)
TITLE	LJ DELETE	51 THEE		Change Addition
NAME STREET ADDOCCS		5.2 NAME		
STREET ADDRESS CITY-ST-ZIP		5.3 STREET ADDRESS 5.4 City - St - Zip		
TITLE	☐ DELETE	6.1 Tillf		Change Addition
NAME	-	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - 7IP		
14. I do hereby certify that the information supp information indicated on this annual report of I am an officer or director of the purporation appears in Block 12 or Block 13 if changed	ir supplemental annual report is tri	ue and accurate and th	at my signature shall have the same leg	ial effect as if made under oath; that