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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Mar 05 1997 8:00am

Secretary of State

(96/6)

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000022317 (9)

L.R.K. INVESTMENTS, INC.

14. I do hereby certify that the information information indicated on this annual I am an officer or director of the corp appears in Block 12 or Block 13 if cly

SIGNATURE:

Mailing Address Principal Place of Business 5497 BENCHMARK LANE 5497 BENCHMARK LANE SANFORD FL 32773-6433 SANFORD FL 32773 US 3. Date Incorporated or Qualified 3a. Date of Last Report 03/18/1994 05/01/1996 Applied For 2. Principal Place of Business 2a. Mailing Address FEI Number 59-3236198 Not Applicable 26 Suite, Apt #, etc Suite Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees 23 Żιρ Country Ζıp Country This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SCMITT, RICHARD **5497 BENCHMARK LANE** Street Address (P.O. Box Number is Not Acceptable) SANFORD FL 32773 83 84 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. Lam Reference. I and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stay for 6, type 1 or printed name of registered ages? and offert applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ☐ DELETE 1.1 TITLE Change Addition TITLE SCHMITT, ELIZABETH 1.2 NAME NAMÉ **5497 BEANCKMARK LANE** 1.3 STREET ADDRESS STREET ADDRESS SANFORD FL 32773 1.4 CITY - ST-ZIP CHY-ST-ZIP DELETE 2.1 TITLE Change Addition TATLE SCHMITT, RICHARD 2.2 NAME NAM² **5497 BENCHMARK LANE** STREET ADDRESS 2.3 STREET ADDRESS SANFORD FL 32773 2 4 CITY-ST-ZIP CHY-ST ZIP DELETE Change 3.1 TITLE Addition THUE CHITWOOD, KENNETH 3.2 NAME NAVE **450 LAKEPORT COVE** 3.3 STREET ADORESS STREET ADDRESS CASSELBERRY FL 32707 3.4 CITY-ST-ZIP CITY - ST - 7/P DELETE Change Addition TITLE 41 TITLE € NAMÉ 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIF 4.4 City-St-ZiP DELETE Addition 51 TITLE 1005 NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 54 CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE . THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHTY - ST - ZIP Paty-St-7P

uplied with this filing close not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the first or suppremental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or or true receiver or trustee employed edge execute this report as required by Chapter 607, Florida Statutes; and that my name