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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000026760 (6)

PHILBURN LEISURE LIMITED, INC.

**FILED** Apr 13 1998 8:00am Secretary of State



| Married Business   Married Address   Married Married Address   Married Married Married Address   Married   |   |   |                                       |   |                                     |                       |                                    |   |                               |                         |                            |   |
|--|---|---|---------------------------------------|---|-------------------------------------|-----------------------|------------------------------------|---|-------------------------------|-------------------------|----------------------------|---|
| SOUTH KRIRGY W. YORKSHRE UK  S. Date Incorporated or Gualified O4/07/1994  4. EET Number Superior of Gualified O4/07/1994  5. Certificate of Status Desired Fee Required Fee Req | Principal Place of Business Mailing Address       |   |                                       |   |                                     |                       |                                    | T I GEOLUEES IND VENIN DIOLI JERLIN DEILIN OD   |                               | Neile ambin me          | ing <b>en</b> si (ng:      |   |
| UK  3. Date Incorporated of Cutalified  4. FEI Number  5. Hamper   | SOUTH KIRKBY, W. YORKSHIRE SOUTH KIRKBY, W. YORKS |   |                                       |   |                                     |                       |                                    |   |                               |                         |                            |   |
| 2. Principal Piace of Business   2. Mining Address   2. Mining Address   3. File Number   Applied For Mark   |   |   |                                       | KSHIRE  |                                     |                       | DO NOT WRITE IN THIS SPACE         |   |                               |                         |                            |   |
| 2. Mailing Address   2. Mailin | UN.   |   | •                                     | UN  |                                     |                       |                                    |   |                               |                         |                            |   |
| 2. Mailing Address   2. Mailin |   |   |                                       |   |                                     |                       |                                    | 04/07/1994  |                               |                         | İ                          |   |
| Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Per Required   Statute Desired   Statute Desired   Scale   Sc | 2. Principal Pl                                   | ace of Business   | 28.                                   | . Mailing Address   |                                     |                       |                                    |   |                               | Ap                      | plied For                  |   |
| City & State  Country  City & State  City & State  Country  City & State  Country  City & State  City & State  City & State  Country  City & State  City & State  Country  City & State  City & State  City & State  Country  City & State  City & State  City & State  Country  City & State  City & State  Country  City & State   | 1   |   | 26                                    |   |                                     |                       |                                    | 52-1885777  |                               | No                      | t Applicable               |   |
| City & State   City & State   City & State   City & State   S. Election Campaign Financing   \$5.00 May Be Added to Fees   Trust Fund Contribution   Added to Fees   Added to Fees   Trust Fund Contribution   Trus  | Suite, Apt.                                       | #, etc.   | 匸                                     | Suite, Apt. #, etc.   |                                     |                       | -                                  | 5. Certificate of Status Desired  |                               | ·                       |                            |   |
| Trust Fund Contribution   Added to Fees  | 2]  |   | 27                                    |   |                                     |                       |                                    |   |                               |                         | <u>'</u>                   |   |
| Zop    | ¬ '   |   | $\vdash$                              | City & State  |                                     |                       |                                    |   | L                             | <b>v</b>                |                            |   |
| PAPPAS, PETER C 225 E. ROBINSON ST. SUITE 540 ORLANDO FL 32802  83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1506. Florida Statutes, the above nemed corporations submits this statement for the purpose of changing its registered organi. or both, in the Sinte of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered organi. and the analysis and ecopy the objective of Section 607 0505. Florida Statutes, the above nemed corporation's board of directors. I hereby accept the appointment as registered organi. and the analysis and the fault that the objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. The objective of Florida Statutes are also for the objective of Florida Statutes. |   | Country   | 28                                    | 7m  | Col                                 | intru                 |                                    |   |                               |                         |                            |   |
| B. Name and Address of Current Registered Agent  PAPPAS, PETER C 225 E. ROBINSON ST. SUITE 540 ORLANDO FL 32802  44 City FL 85 Zip Code  TI. Pursuant to the provisions of Sections 607 0562 and 607 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am milliar with, and accept the obligations of, Section 607 0565, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am milliar with, and accept the obligations of, Section 607 0565, Florida Statutes.  SIGNATURE  Signature, typed or present name of impatient agent and time if equations in the first of the purpose of changing its registered agent. I am milliar with, and accept the obligations of, Section 607 0565, Florida Statutes.  SIGNATURE  Signature, typed or present name of impatient agent and time if equations in the first of the purpose of changing its registered agent. I am milliar with, and accept the obligations of, Section 607 0565, Florida Statutes.  SIGNATURE  Signature, typed or present name of impatient agent and time if equations in the first of the purpose of changing its registered agent ag | <b>¬</b> '  | <u>├</u>  | 20                                    | · —   |                                     |                       |                                    |   |                               |                         |                            |   |
| PAPPAS, PETER C 223 E. ROBINSON ST. SUITE 540 ORLANDO FL 32802  84   | 4   |   |                                       | stered Agent  | 30                                  | 1                     |                                    |   |                               |                         |                            |   |
| 225 E. ROBINSON ST. SUITE 540 ORLANDO FL 32802  28   | PΔ  |   |                                       |   |                                     | 81                    | Name                               |   | <del></del>                   | <u> </u>                |                            |   |
| SUTTE 540 ORLANDO FL 32802  88 ORLANDO FL 32802  84 Orly 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. Jet in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Jet maintaine with, and accept the orthographor sof, Section 607 0505. Florida Statutes.  SIGNATURE Signature typed or protein maintained in speciment agent and their acquired as the transport of the purpose of changing its registered agent. Jet maintained with, and accept the orthographor of 20505. Florida Statutes.  SIGNATURE  12. OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. CITY-ST-2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  15. ADDITIONS/CHANGES TO OFFIC |   |   |                                       |   |                                     | 92                    | Stroot Add                         | rone (P.O. Boy Number is Not Accountable  |                               |                         |                            |   |
| ORLANDO FL 32802    83   |   |   |                                       |   |                                     | 02                    | Stieet Addi                        | ress (F.O. Box Number is Not Acceptat   | no,                           |                         |                            |   |
| 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of the provided agent appointment as registered agent agent. I am familiar with, and accept the obligations of the provided agent appointment as registered agent agent. I am familiar with, and accept the obligations of the provided agent agent. I am familiar with, and accept the appointment as registered agent agent. I am familiar with, and accept the obligations of the provided agent. I am familiar with and accept the appointment as registered agent agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the obligation of the provided agent. I am familiar with and accept the obligations of the provided agent. I am familiar with an accept the obligation of the provided agent. I am familiar with an accept the  |   |   |                                       |   |                                     | 83                    |                                    |   |                               |                         |                            |   |
| 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Socions 607 0505, Florida Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of the provided agent appointment as registered agent agent. I am familiar with, and accept the obligations of the provided agent appointment as registered agent agent. I am familiar with, and accept the obligations of the provided agent agent. I am familiar with, and accept the appointment as registered agent agent. I am familiar with, and accept the obligations of the provided agent. I am familiar with and accept the appointment as registered agent agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent. I am familiar with and accept the obligation of the provided agent. I am familiar with and accept the obligations of the provided agent. I am familiar with an accept the obligation of the provided agent. I am familiar with an accept the  | •   |   |                                       |   |                                     | 0.4                   | City                               |   |                               | es 7in                  | Codo                       |   |
| Aggent, I arm familiar with, and accept the obligations of, Section 807.0505, Fiorida Statutes  SIGNATURE  Signature, typed or protect name of registered agent and life. If acquised time in acquised life. If acquised signature required when raintaining)  DATE  12. OF FICERS AND DIRECTORS  DELETE  1.1 TITLE  BLACKBURN, JOHN  3 MAYFIELDS WAY  3 MAYFIELDS WAY  3 MAYFIELDS WAY  5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DIRECT ADDRESS  OFFY-ST-2P  TITLE  DATE  DELETE  2.1 TITLE  2.2 NAME  3.2 NAME  STREET ADDRESS  OFFY-ST-2P  DATE  CONQLETON CHESHIRE CW 12 4S2  DELETE  3.1 TITLE  3.2 NAME  1.3 STREET ADDRESS  OFFY-ST-2P  TITLE  DATE  CONGLETON CHESHIRE CW 12 4S2  2.4 OITY-ST-2P  DELETE  3.1 TITLE  3.3 STREET ADDRESS  OTY-ST-2P  DELETE  3.4 OITY-ST-2P  DELETE  4.1 TITLE  AGdition  Addition  MAKE  STREET ADDRESS  OTY-ST-2P  DELETE  4.1 TITLE  AGDITIONS/CHANGES IN 12  Change  Addition  Addition  Addition  AGDITIONS/CHANGES IN 12  ADDITIONS/CHANGES IN 12  ADDITIONS/CHANGES IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTITLE  DATE  1.3 STREET ADDRESS  COTY-ST-2P  DATE  1.4 CITY-ST-2P  DELETE  3.1 TITLE  DELETE  3.1 TITLE  Change  Addition  Addition  AGDITIONS/CHANGES IN 12  ADDITIONS/CHANGES IN 12  ADDITI |   |   |                                       |   |                                     |                       | •                                  |   |                               | '                       | i                          |   |
| Signature, hybord or promote name of impostenced against and the in a synake about i | 11. Pursuant I<br>office or re<br>agent. I a      | o the provisions of Sections 607.050:<br>egistered agent, or both, in the State<br>m familiar with, and accept the obliga | 2 and 6<br>of Flori<br>ations o       | 607.1508, Florida Statute<br>da. Such change was a<br>if, Section 607.0505, Flo | es, the a<br>authorize<br>orida Sta | bove<br>d by<br>tutes | e-named corp<br>the corporat<br>s. | poration submits this statement for the parties to the parties of | ourpose of co<br>of the appoi | hanging it<br>ntment as | s registered<br>registered |   |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITITLE BLACKBURN, JOHN   | SIGNATURE   | Sloven we have do received name of recustered age   | nt nod litie                          | a if Applicable (NOT)   | F. Registers                        | od Ane                | nt signature techni                | ined when reinstating)  | DATE                          |                         |                            | - |
| TITLE  MAME  BLACKBURN, JOHN  3 MAYFIELDS WAY  STRET ADDRESS  OTY-ST-ZP  SOUTH KIRKBY, W. YORKSHIRE  TITLE  PORD, PHILIP  OAKLANDS BRERETON HEATH LANE, BRERETON HTH  CONGLETON CHESHIRE CW 12 4S2  TITLE  JOELETE  31 TITLE  JOELETE  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Addition  Change  Chan |   |   |                                       |   |                                     |                       | - Digratare roqui                  |   |                               | DIRECTOR                | IS IN 12                   | 1 |
| STREET ADDRESS OITY-ST-ZP SOUTH KIRKBY, W. YORKSHIRE  DELETE FORD, PHILIP OAKLANDS BRERETON HEATH LANE, BRERETON HTH CONGLETON CHESHIRE CW 12 4S2  DELETE 31 TITLE AMME 32 STREET ADDRESS CITY-ST-ZIP TITLE AMME 33 STREET ADDRESS CITY-ST-ZIP TITLE AMME ALCITY-ST-ZIP TITLE AMME ASSIREET ADDRESS CITY-ST-ZIP TITLE AMME ACTITY-ST-ZIP TITLE ACTITICE ACTIT | <del></del>                                       | 0   |                                       | ☐ DELETE  | 1.1 T                               | ITLE                  |                                    |   |                               | Change                  | Addition                   | 3 |
| Offy-St-Zep  SOUTH KIRKBY, W. YORKSHIRE  D   | NAME  | BLACKBURN, JOHN   |                                       |   | 1.2 N                               | IAME                  |                                    |   |                               |                         |                            | č |
| TITLE D DELETE 21 TITLE 22 NAME STREET ADDRESS CITY-ST-ZIP DELETE 31 TITLE 21 NAME STREET ADDRESS CITY-ST-ZIP DELETE 41 TITLE 21 NAME STREET ADDRESS CITY-ST-ZIP DELETE 41 TITLE 21 NAME STREET ADDRESS CITY-ST-ZIP DELETE 41 TITLE 21 NAME STREET ADDRESS CITY-ST-ZIP ADD | STREET ADDRESS                                    | 3 MAYFIELDS WAY   |                                       |   | 1.3 S                               | TREET                 | ADDRESS                            |   |                               |                         |                            | Š |
| FORD, PHILIP   | CITY-ST-ZIP                                       | SOUTH KIRKBY, W. YORKSH   | IRE                                   |   | 1.40                                | HTY-S                 | T-ZIP                              |   |                               |                         |                            | Ç |
| OAKLANDS BRERETON HEATH LANE, BRERETON HTH   23 STREET ADDRESS   2 4 CITY-ST-ZIP   | TITLE   | _   |                                       | ☐ DELETE  | 2.1 T                               | ITLE                  |                                    |   | L                             | Change                  | Addition                   | ζ |
| CONGLETON CHESHIRE CW 12 4S2   2 4 CITY-ST-ZIP   | NAME  |   |                                       |   |                                     | IAME                  | 1                                  |   | -                             |                         |                            |   |
| DELETE   STREET ADDRESS   STREET ADDRE   | STREET ADDRESS                                    |   |                                       |   | 235                                 | TREET                 | ADDRESS                            |   |                               |                         |                            |   |
| NAME   |   | CONGLETON CHESHIRE CW   | 12 45                                 |   |                                     |                       | ST-ZIP                             |   |                               | Change                  | Addition                   |   |
| STREET ADDRESS   3 3 STREET ADDRESS   3 4 CITY-ST-ZIP  |   |   |                                       | [ ] DETELE  |                                     |                       |                                    |   | L                             | Unange                  | Addition                   |   |
| STREET ADDRESS   STRE   |   |   |                                       |   |                                     |                       |                                    |   |                               |                         |                            |   |
| TITLE DELETE 4.1 TITLE   | 1   |   |                                       |   | 1                                   |                       |                                    |   |                               |                         |                            |   |
| A 2 NAME   A 2 NAME   A 3 STREET ADDRESS   A 3 STREET ADDRESS   A 4 CITY-ST-ZIP   Change   Addition  |   |   |                                       | DELETE  |                                     |                       | 51- ZIP                            |   | Т                             | Channe                  | Addition                   |   |
| STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP  | 1   |   |                                       |   |                                     |                       |                                    |   | , •                           |                         |                            |   |
| ALCITY-ST-ZIP  |   |   |                                       |   |                                     |                       | Annecce                            |   |                               |                         |                            |   |
| TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME </th <th></th>  |   |   |                                       |   |                                     |                       |                                    |   |                               |                         |                            |   |
| NAME   |   |   |                                       | DELETE  | _                                   |                       | 11-211                             |   |                               | Change                  | Addition                   |   |
| STREET ADDRESS   |   |   |                                       | <del></del>   |                                     |                       |                                    |   |                               |                         |                            |   |
| CITY-ST-ZIP         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CITY-ST-ZIP   |   |   |                                       |   |                                     |                       | ADDRESS                            |   |                               |                         |                            |   |
| TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CITY-ST-ZIP   |   |   |                                       |   |                                     |                       |                                    |   |                               |                         | İ                          |   |
| NAME  5.2 NAME  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  6.4 CITY-ST-ZIP   |   |   | · · · · · · · · · · · · · · · · · · · | ☐ DELETE  |                                     |                       |                                    |   | Ţ                             | Change                  | ☐ Addition                 | l |
| STREET ADDRESS  6.3 STREET ADDRESS  CITY-ST-ZIP  6.4 CITY-ST-ZIP   |   |   |                                       |   | 6.2                                 | IAME                  |                                    |   |                               |                         |                            |   |
| CITY-ST-ZIP 6.4 CITY-ST-ZIP  |   |   |                                       |   | 6.3 5                               | TREET                 | ADDRESS                            |   |                               |                         |                            |   |
|  |   |   |                                       |   | 6.40                                | CITY-S                | ST-ŽIP                             |   |                               |                         |                            |   |
|  | 14. I hereby o                                    | certify that the information supplied w   | ith this                              | filing does not qualify fo  |                                     |                       |                                    | Section 119.07(3)(i), Florida Statutes.   | further cert                  | ify that the            | information                | l |

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 eath; that I am a 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 13 if changed, or on an attachment with an address.

3 APRIL 1998