FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P94000034934 (7)

SANFORD HOUSE, INC.



Principal Place of Business Mailing Address												
2421 E. JEFFERSON STREFT 2421 E. JEFFERSON STREE				TREET	т							
ORLANDO FL 32803			ORLANDO FL 32803			3. Date Incorporated or Qualified 3a. Date of Last Report 05/05/1994 05/01/1995						
2. Principal Plac	e of Business	2a.	Mailing Address				4.	FEI Number 59-3242003	.1		Applied For Not Applicable	
			4				\$8.75 Additional					
Suite, Apt. #,	etc.	27	Suite, Apt. #, etc				5.	Certificate of Status Desired			e Required	
Crty & State			City & State				6.	Election Campaign Financing			.00 May Be	
3		28		······································				Trust Fund Contribution			ded to Fees	
Ζιρ	Country	L	2 _(f)	Cou	intry		8.	This corporation has liability for Florida Statutes Yes	intangibie ta ∐No	ax orider	\$ 199.002,	
4	9. Name and Address of Current I	29 Ponis	tered Agent	30			10	Name and Address of New F		Agent		
	9. Name and Address of Current	negis	stered Agent	···	81	Name		1,712				
	**************************************					0	/E	O. Box Number is Not Acceptat	ле)	·		
	THOMAS B JR.				82	Street Addre	ess (F	O. BOX Number is not Acceptate	ne;			
	Drange avenue Do FL 32802				83			and the state of t				
OUCAND	70 FL 32002				84	City				85	Zip Code	
	the provisions of Sections 607,0502 a					'	_		FL			
12.	Signaturi, Typica or printiss ha accelerative of agriculta. OFFICERS AND		CTORS	13.				ADDITIONS/CHANGES TO OFF			DTORS IN 12	
TITLE	PD	L/I/ 11	DELETE	1 1						Chan		
NAME	DRAGE, JOANNE R			121	VAME							
STREET ADDRESS	2421 E. JEFFERSON STREET	ľ		1.3.5	SIKEF	LADORESS						
C:TY-ST-ZIP	ORLANDO FL 32803					SI-ZIP				Chan	nge	
TITLE	VSTD		☐ DEFELE		TETUE NAME						a. L.	
NAME	DRAGE, THOMAS B	,				1 ADDRESS						
STREET ADDRESS	2421 E. JEFFERSON STREET ORLANDO FL 32803	•				ST 7.P						
CITY - ST - ZIP TITLE	ONLANDO I E GEGGG	.,	DELÉTE		TITLE					Char	nge 🔲 Additio	
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City - ST - ZiP						\$1 - 7 (P				Cha	ange 🔲 Additi	
TITLE			☐ DELET€		1 TITL					<u>.</u>	- Lad 712011	
NAME					NAM	E Fet address						
STREET ADDRESS				1		·ST-ZIP						
CITY-ST-7IP				5.4	L'III	101.41F 1	for th	o evenuation stated in Section 11	9.07(3)(k)	Florida 5	Statutes, I further	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made unider certify 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 13 if changed, or on an attachment with an address

SIGNATURE:

Thomas B. Drage, Sr., Sec.-Treas. 6/17/96 407/895-0193

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Cophie Place

C