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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 07 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000038915 (2)

BETTER EFFORTS, INC.

Principal Place of Business 18750 HIGHWAY 441 MT. DORA MARKETPLACE MT. DORA FL 32757 US		Mailing Address				) HERVINDS IND SOULD BUILD GROW ROLLS BOILD BUILD BUILD IN HERVE HOLDS LINDS EATH CODE			
		MT. DORA MARKET	18750 HIGHWAY 441 MT. DORA MARKETPLACE MT. DORA FL 32757-6723						
		US			05/24/1994 04/		ate of Last Report /12/1996		
2. Principal P	lace of Business	2a. Mailing Addres	iS			4. FEI Number	•	J	oplied For
1 39507 CR 439		26						ot Applicabl	
Suite, Apl	#, etc.	Suite, Apt. #, et	tc.			5. Certificate of Status Desired		\$8.75 A	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be	
Umatilla, FL		28			Trust Fund Contribution		Added 1		
Zip	Country	Zip		Country		8. This corporation has liability for	intangible	tax under s	. 199.032,
327	84     25   Lake	29	30				Yes		
	9. Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Re	GIRTOLOG Y	rgent	
SEMENTO, LAWRENCE J					Haire				
	NORTH BAY ST.		82 Street A		Street Add	dress (P.O. Box Number is Not Acceptat	oie)		
EUS	STIS FL 32726			83	<u> </u>				
				63					
				84	City		FL	<b>85</b> Zip (	Code
4 6	60.70		Ct. t. t. a. At			rporation submits this statement for the p			- conjetes
SIGNATURE	Signal co-types or pointed name of regulations					ation's board of directors. I hereby acce	DATE		
2.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOF	S IN 12
ITLE	DP	☐ DEL€	TE	1.1 TITLE				Change	Addit
AME	BARMORE, THOMAS			1.2 NAME					
TREEL ADDRESS	39507 COUNTY RD 439			1.3 \$TREET	ADDRESS				
DTY - ST - ZIP	UMATILLA FL 32784			1.4 CITY - S	T-ZIP				
TILE	DVP	☐ DELE	TE	2 1 TITLE				Change	Addit
IAMF	RIGGS, JOSEPH		ŀ	2.2 NAME	.				
STREET ADDRESS	39054 ROSE STREET			23 STREET	ADDRESS				
CHTY-ST-ZIP	UMATILLA FL			2 4 CITY - 9	ST-ZIP	· · · · · ·			
'IILE	DS ,	☐ DELE	TE	31 TITLE				Change	Addili
NAME	RIGGS, TERESA			32 NAME					
STREET ADDRESS	39054 ROSE STREET			33 STREET	ADDAESS				
CITY - ST - ZiP	UMATILLA FL	D DC:		34. C(TY-5	ST-ZIP			1105555	1 (445)
TITLE	DT DE PETOV	☐ DELE	1	4.1 TITLE	j			Change	Additi
NAME	BARMORE, BETSY			4 2 NAME					
STREET ADDRESS	39507 COUNTY RD. 439		3	4.3 STREET	<b>1</b>				
CITY-ST-7IP	UMATILLA FL 32784	☐ DELI		4.4 CITY-S	T-ZIP			Change	Addit
HILE		L] Dttl	: IC	5.1 TITLE				Change	L.J AGUIC
NAME			:	5.2 NAME					
STREET ADDRESS			1	5.3 STREET		•			
DITY-ST-ZP		☐ DELE		5.4 CITY - S	T-ZIP			Change	Addit
TITLE		☐ UELE	: וב	6.1 TITLE				unange	L. Addit
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET					
CITY-ST. 7(P	i			64 CITY-5	T - 7/P				

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