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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

## Sandra B. Mortham

Secretary of \$tate
DIVISION OF CORPORATIONS

DOCUMENT # P9400039609 (0)

THE CAROUSEL HOUSE, INC.

Principal Place of Business

Mailing Address

## FILED May 06 1997 8:00am Secretary of State



101 BEACH AVENUE ALTAMONTE SPRINGS FL 32701		101 BEACH AVENUE ALTAMONTE SPRINGS FL	101 BEACH AVENUE ALTAMONTE SPRINGS FL 32701-7901		
				<ol> <li>Date Incorporated or Qualified 05/23/1994</li> </ol>	3a. Date of Last Report 08/19/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 SAM		26 SAME AS	ABOUR	59-3248999	Not Applicable
Suite, Apt. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>24</b>	Country 25		Čountry 30		Yes No
	9. Name and Address of Cui	rent Registered Agent		10. Name and Address of New Re	gistered Agent
	EINBIHL, LORETTA		81 Name		
	BEACH AVENUE AMONTE SPRINGS FL 32701	1		ddress (P.O. Box Number is Not Accepted	(6)
			83		
			84 City		FL 85 Zip Code
office or re	egistered agent, or both, in the St	0502 and 607.1508, Florida Statute ate of Florida. Such change was a oligations of, Section 607.0505, Flor	uthorized by the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
SIGNATURE:	Signature, typed or printed name of registerer	agent and title Kapplicable (NON)	Registered Agent signature re	squited when reinstating)	DATE
12.		AND DIRECTORS	18.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	DELETE	1.1 TITLE	TREASURER	ERS AND DIRECTORS IN 12  Change Addition
NAME	KREINBIHL, LORETTA		1.2 NAME	DENNIC J. DRONE)	<b>/</b>
STREET ADDRESS	101 BEACH AVENUE		1.3 STREET ADDRESS	101 BEACH AVE	701
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	32701	1.4 C(1Y+S1-7)P	Dennis J. Drone) 101 BEACH AVE ALT: SPGS, FLA. 32.	70)
TITLE	VD	☐ DELETE	2.1 TITLE	7(2)	Change Addition
NAME	Kreinbihl, Thomas		2.2 NAME		
STREET ADDRESS	101 BEACH AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		2 M CHY-S1-71P		
TITLE		☐ DETE1E	3111111		☐ Chango ☐ Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - S1 - ZIP		
TITLE		☐ DELETE	4,1 TITLE		L Change L Addition
NAME			4. P NAME		
STREET ADDRESS			4,3 STREET ADDRESS		ĺ
CITY-ST-ZIP		DELETE	4,4 CITY - ST - ZIP		Change Addition
TITLE			5.1 THE		Change Addition
NAME			5.2 NAME		i
STREET ADDRESS			5.3 STREET ADDRESS		Į.
CITY-ST-ZIP		DELCTE	5.4 CITY - ST - ZIP		Change Addition
TITLE		til bruit	G 1 VITLE		L_J Change L_J Addition
NAME OTOGET ADDRESS			6.2 NAME		
STREET ADDRESS			G.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

In do nereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(t), Florida Statutes. Figure: certify that the information indicated on this anytal report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the chripperation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13.1 changes at on an attachment with an address:

CIGNATUDE:

4 76-91

467- 332-1589