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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

0048854

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000044441 (1)

LADOU CORPORATION Mailing Address Principal Place of Business 633 TIMBERLANE ROAD **633 TIMBERLANE ROAD** TALLAHASSEE FL 32312 TALLAHASSEE FL 32312-1615 3. Date Incorporated or Qualified 3a. Date of Last Report 06/14/1994 05/01/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 26 59-3249876 21 Not Applicable 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 Added to Fees 23 28 Zø Country Zio 8. This corporation has liability for intangible tax under s. 199.032, 25 29 30 Florida Statutes Yes No 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CAPITAL CORPORATE SERVICES, INC. **633 TIMBERLANE ROAD** Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32312 83 Zip Code 11. Pursuant to the previsions 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. I am lamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typica or protect cache of registered agent and title diapplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 96/6) 13. Change Addition DELETE 1.1 TITLE 1111 GAY, L. LAMAR 1.2 NAME NAME **633 TIMBERLANE ROAD** 1.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32312 CHY-SI-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE 1000 URIDEL, DOUG 2.2 NAME NAME 1200 S WHITNEY ROAD STREET ADDRESS 2.3 STREET ADDRESS LEESBURG FL 34748 CITY-ST ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 1011 3.2 NAME NAM STREET ADDRESS 33 STREET ADDRESS 3.4. CITY - ST - ZIP DITY 51-7-P Addition DELETE Change DILLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS City - \$1 - 7IP 4.4 CITY-ST-ZIP Change Addition ]4]\_F DELETE 51 TITLE 5.2 NAME NAM STREET ADDRESS 5.3 STREET ADDRESS 5.4 City-St-ZIP CHY-ST-20 Change Addition DELETE TELF 61 TITLE NAM: 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CCY- \$1 - 7 P 6.4 CITY-ST-ZIP 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 appears in Block 12 or Block 13 if changes on an attachmon with an address.

LA GAMMAN GAR