## 5-14-97 R-7235 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

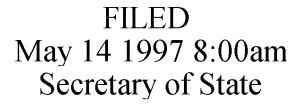
## DOCUMENT # P94000049452 (3)

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

KELSEY'S PIZZA OF ORLANDO, INC.

Principal Place of Business
2140 CHICKBAW TR

Mailing Address





ORLANDO FL 32825 US		O BUX 678067 ORLANDO FL 32867-6087 US					
					3. Date Incorporated or Qualified 06/28/1994	3a. Date of Last F 02/22/1996	Report
	2. Principal Place of Business 2e. Mailing Address 2140 Chillian Assu 72 26				4. FEI Number 59-3255254	Applied For Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc		Certificate of Status Desired     Sa.75 Additional Fee Required			
City & Stat 23 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	mas.Fr	City & State			Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip	282 Country	7 p	Countr 30	у	8. This corporation has liability for in Florida Statutes	inta gible tax under s Yes \( \square\) No	. 199.032,
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
1050	OPOULOS, NICK DO VIA DEZ SOL ANDO FL 32817		81 82 83	Street Add	ress (P.O. Box Number is Not Acceptate	) - Sol	
			84	1 3	romo	- FL     3	S 517
onice or r	to the provisions of Sections 607.0502 registered agent, or both, in the State or im familiar with, and accept the obligat	iLLiorida. Such change was ai	ulhorized b	v the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing in the appointment as	ts registered registered
SIGNATURE	Signature, lyped or prioted hame of registrated agent			Ma	( ILTSTALLO) red when icinstaling)	433.9	1
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	3S IN 12
TITLE	D DOLLAR DIGUES	☐ DELEJE	1.1 TIFLE	7		Change	Addition
NAME	ILTSOROLOUS, NICHOLAS		1.2 NAM(	1.	ltsopoulds, Nia	401-07	
STREET ADDRESS	% P.O. BOX 678087 (N/A)		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32867		1.4 CiTY - :	ST - 71P			
TITLE ,	D CARTH DAIGH	☐ DELETE	21111111			☐ Change	Addition
NAME	SMITH, RALPH		22 NAME				
STREET ADDRESS	% P.O. BOX 678067 (N/A) ORLANDO FL 32867			FADDRESS			
CITY-ST-ZIP TITLE	D CHLORIDO FL 32007			S1 - ZIP			·
NAME	SMITH, CODY		3111111			L Change	Addition
STREET ADDRESS	% P.O. BOX 678087 (N/A)		3.2 NAME		·		
	ORLANDO FL 32867			ADDRESS			
CITY-ST-ZIP TITLE	OTE TE GEOGR	DELETE	3.4 CHY- 4.1 TITLE	SI · ZIP		Change	Addition
NAME		C Section	4. 2 NAME			Change	LJ Mubilion
STREET ADDRESS				LADDRESS			
CITY-ST-ZIP			4.4 City - 5				
TITLE		DELLLE	5.1 THLE	21.71		Change	Addition
NAME			5.2 NAME			C) Guarde	FT Vanicali
STREET ADDRESS			5.3 STREET	LADDRESS			
CITY-ST-ZIP			5.4 CITY - 5				
TITLE		DELETE 6.1 T		21 ZII		Change	Addition
NAME		-	6.2 NAME			Comings	
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			6.4 CITY - 5				
14. I do heret	by certify that the information supplied	with this filing does not qualify	of the exc	mption state	d in Section 119.07(3)(i). Florida Statutes	s. I further certify that	the
Informatio	on indicaled on this annual teorit of sui	pplemental annual report is tru ne receiver or trustee emoowe	ue and acci pred to exec	urate and that	t my signature shall have the same lega rt as required by Chapter 607, Florida S	Laffarit on it made un	elar andle