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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000052596 (1)

FIRST MANAGEMENT GROUP OF ORLANDO, INC.

Principal Placi	e of Business	Mailing Address	ailing Address			t santinds din sauli dinis satis naisi naisi	A EI AI AINIA I	(RA) ener chrid	M Brit ran
10182 BRANDO ORLANDO FL 3		10182 BRANDON CIR ORLANDO FL 32836-3718	10182 BRANDON CIR ORLANDO FL 32836-3718						
						3. Date Incorporated or Qualified 07/15/1994		te of Last R	Report
	lace of Business	2a. Mailing Address	<u> </u>			4. FEI Number 59-3255395		P	oplied For of Applicable
21 Suite, Apt	#. etc	Suite, Apt. #, etc.							Additional
22		27				5. Certificate of Status Desired		Fee Re	
City & State	е	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
7(p	Country	7(p)				This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30			Florida Statutes			
	9. Name and Address of Cu	ırrent Registered Agent				10. Name and Address of New Re	jistered /	igent	
PAR	k, Joseph D		['	81	Name				
	B2 BRANDON CIR]	82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
OHL	ANDO FL 32836		1	83					
			ī	84	City			85 Zip	Code
		***************************************					<u>FL</u>		
office of r agent La SIGNATURE	registered agent, or both, in the 8 im familiar with, and accept the c	obligations of, Section 607.0505, F	lorida Statu	лes		poration submits this statement for the plan's board of directors. I hereby acceptions the properties of the properties	ot the app	ointment as	registered
12.	The state of the s	AND DIRECTORS	13.	-		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
701.6	D	DELETE	1.1 1011	LE				☐ Change	Addition
NAME	PARK, JOSEPH D		1.2 NA	ME					
STREET ADDRESS	10182 BRANDON CHR		1.3 STR	REET.	ADORESS				
CITY - ST - ZIP	ORLANDO FL 32836		1.4 CIT		T-ZIP	· · · · · · · · · · · · · · · · · · ·			F-12.000
1IT,F		☐ DELETE	2.1 TIT		- 1			Change	Addition
NAME			22 NA!						
STHEFT ADDRESS					ADDRESS				
City - St - Zift Title		DELETE	2 4 CITY - ST - ZIP 3.1 TITLE		ST-ZIP			Change	Addition
NAME		ottet	3.2 NAI					\$1.00.1g0	L , risolosi
STREET AFORESS			ı		ADDRESS				
CHY-ST-ZIP			3,4, Cit						
THUE	☐ DELETE			LE				Change	Addition
NAME			4. 2 NA	ME	Ì				
STREET ADDRESS			4.3 STF	REET	ADDRESS				
CHY-ST-ZIP			4.4 CIT	Y - \$1	T-ZIP				
THE		L_) DELETE	5.1 TIT					Change	Addition
NAME			5.2 NA						
STREET ADDRESS					ADDRESS				
CCTY+ST+ZIP		DELETE	5.4 CIT 6.1 TIT		1-219			Change	Addition
TITLE		□ orreit	6.1 III					-1 Aumilia	required
NAME OTHER TARREST OF					ADDRESS				
STREET ADDRESS			1		ì				
14. 1 do here	by certify that the information sur	pplied with this filing does not aua	6.4 Cit	exe	mption stated	d in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
informatio	on inclicated on this annual repor	t or supplemental annual report is	true and a	сси	irate and that	t my signature shall have the same lega rt as required by Chapter 607, Florida S	d effect as	if made un	ider oath; that

SIGNATURE:

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR D. Park 4/29/97 407-834-3867