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 # P9400056386 (3)

NEW CONCEPTS IN DESIGN, INC.

Principal Place of Business Mailing Address				{	08:01 01(12 3 :100 1110) :0113 612: 1041	
8336 HIGHWAY LAKE WALES F		3336 HIGHWAY 27 SOUTH LAKE WALES FL 33853-8013				
					3. Date Incorporated or Qualified 07/28/1994	3a. Date of Last Report 04/08/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3261420	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State	City & State			Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country			Zip Country			
25		29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 4No	
	9. Name and Address of Curren				10. Name and Address of New Re	gistered Agent
ELLI	NGTON, ROBERT		81	Name		
	HIGHWAY 27 SOUTH		82	82 Street Address (P.O. Box Number is Not Acceptable)		
LAKE WALES FL 33853						
			83			
			84	City		85 Zip Code
						FL
11. Pursuant office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State	2 and 607.1508, Florida Statu of Florida. Such change was	tes, the above authorized by	e-named cor the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	urpose of changing its registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes	ŝ.	and the second of the second of the second	t the appearance to regional ba
SIGNATURE	Signature, typed or printed name of registered age:				***************************************	
12.	OFFICERS AND		13.	eni signature req.	Pred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EBS AND DIRECTORS IN 12
TITLE	PD	DELETE 1.º		T	TESTITOTO, OT INCIDES TO OF THE	Change Addition
NAME	ELLINGTON, ROBERT		1.2 NAME			" -
STREET ADDRESS	3334 HIGHWAY 27 SOUTH		1.3 STREET	ADDRESS		
CITY-ST-ZIP	LAKE WALES FL 33853		1.4 CITY - S	T - ZiP		
TATLE	VPD	DELETE	2.º TiTLE			Change Addition
NAME	ELLINGTON, JEAN		2.2 NAME			
STREET ADDRESS	3334 HIGHWAY 27 SOUTH		2.3 STREET	ADDRESS		_
CITY-ST-ZIP	LAKE WALES FL 33853		2. 4 CITY - 5	ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE			Change Addition
NAME	ADAMS, CHARLES W		3.2 NAME			
STREET ADDRESS	105 24TH STREET, NORTHWES	अ	3.3 \$1REET	ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34205		3.4 CITY- 9	ST-ZIP		
TITLE	TO DELETE		4.1 TITLE			Change Addition
NAME	ADAMS, MARILYN E	\ T	4. 2 NAME			
STREET ADDRESS	105 24TH STREET, NORTHWES)I	4.3 STREET			
CITY-ST-ZIP	BRADENTON FL 34205	DELETE	4.4 CITY - S	T - ZIP		
TITLE		ריין טנוננונ	5.0 TITLE			Change Addition
NAME OTREET ADDRESS			5.2 NAME	ADEIDEG		
STREET ADDRESS			5.3 STHEET			
CITY-ST-ZIP TITLE		DELETE	57 CITY-S 61 THLE	1 - ZIP		Change Addition
MANAP		OEEE	62 NAME			C Ottange C Maditibil
STREET ADDRESS	: 1			Anthotee		
OTHER MUDIES			63 STREET	MUDDL99		

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 logal effect as if made under eath; 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 changing, or on any aftaching the with an address.

FILED

Apr 28 1997 8:00am

Secretary of State