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 # P9400062915 (1)

LARK ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Apr 23 1997 8:00am Secretary of State



18683 BASELEG AVE. N. FT. MYERS FL 33917		18683 BASELEG AVE. N. FT. MYERS FL 33917-7123					
					3. Date Incorporated or Qualified 08/25/1994	3a, Date of Las 04/29/1996	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0654011	├	Not Applicable
Sulte, Apt. #, etc.		Suito, Apt. #, etc.				60.7	5 Additional
22		27		5. Certificate of Status Desired		Required	
City & State	9	City & State			6. Election Campaign Financing	\$5.0	0 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Ζιρ	Cou	intry	8. This corporation has liability for i	ntangible tax unde	r s. 199.032,
24	25	29	30		Florida Statutes	Yes 📈 No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
JOHN	NSON, LARRY D		,	81 Name			
	3 BASELEG AVE.			82 Street	Address (P.O. Box Number is Not Acceptab	(e)	
N. FI	T. MYERS FL 33917			0.,000.	idences (i.e. box Hambai is Net Neceptals	,	
				83			
				04 04		Apr 7	- 0
				84 City		FL 85 Z	ip Code
11. Pursuant I office or re agent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the Stato m familiar with, and accept the oblig	02 and 607,1508, Florida State of Florida Such change was ations of, Section 607,0505,	iutes, the at s authorize Florida Stat	bove-named d by the corp tutes.	corporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing the appointment	g its registered as registered
SIGNATURE	Signature typed of printed harrie of registered agr	est and title if postilicable (Ni	OTF: Ragistere	d Agent signature	required when reinstating)	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	D	DELETE	1.1 11	TLE		Chang	e Addition
NAME	JOHNSON, LARRY D		1.2 N/	AME			;
STREET ADDRESS	18683 BASELEG AVE.		1.3 S1	TREET ADDRESS			
CITY-ST-ZIP	N. FT. MYERS FL 33917			TY-ST-ZIP			
TITLE		DELETE	2111			Chang	e
NAME			2.2 N	AMF i			_
STREET ADDRESS				IREET ADDRESS			
CITY-ST-ZIP				11Y - ST - ZIP			
TITLE		DELETE	3.1 TI			☐ Chang	e Addition
NAME			3.2 N/	AME			
STREET ADDRESS				IREE1 ADORESS			
CITY-ST-ZIP				ITY-ST-ZIP			
TITLE		DELETE	4.1 71			Chang	e Addition
NAME			4.2 N				
STREET ADDRESS				THEET ADDRESS			
CITY-ST-ZIP				11Y-ST-ZIP			
TITLE		DELETE	51 Ti			Chang	e Addition
NAME	,		5 2 N/				
STREET ADDRESS				IREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CI 6.1 TI	TY-ST-ZIP		Chang	e Addition
		C Decemb				chang	to Li Middingal
NAME			6.2 N/				
STREET ADDRESS				TREE1 ADDRESS			
CITY-ST-ZIP		at with this filter, shows and a		TY-ST-ZIP	lated in Section 119.07(3)(i). Florida Statute	. I forth as a self out	

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 changed, or on an attachment with an address.

KIGNES WALL OF BOMES -

4/18/97

941 1412 62128