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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000067732** (5)

GRAND SLAM GROUP, INC.

505 DELTONA BLVD S102

CLIFTON, GEORGE M.

505 DELTONA BLVD S102

DELTONA FL

DELTONA FL

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

						1 3 8 8 1 9 8 1 1 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1888	
Principal Plac	e of Business	Mailing Address	Mailing Address					
505 DELTONA DELTONA FL	A BLVD. STE. 102 32725		505 DELTONA BLVD. STE: 102 DELTONA FL 32725			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						09/12/1994		
2. Principal Place of Business 2a. Mailing A			Address			4. FEI Number	Applied For	
21		26				59-3272668	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 2 27			etc.	5. Certificate of Status Desired See Required Fee Required				
City & State	9	City & State					\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	30 Co	untry		8. This corporation owes or has paid the current Personal Property Tax due June 30.	, <u> </u>	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent		
EZELL, KENNETH C 505 DELTONA BLVD. STE. 102 DELTONA FL 32725				81	Name			
						dress (P.O. Box Number is Not Acceptable)		
				83				
				84	City	FL B	Zip Code	
office or r	to the provisions of Sections 60 egistered agent, or both, in the m familiar with, and accept the	State of Florida, Such change	ge was authorize	ed by	the corpora	rporation submits this statement for the purpose of cha ation's board of directors. I hereby accept the appoint	nging its registered nent as registered	
SIGNATURE	Signature, typed or printed name of register		MOTE Commission			ured when re-instating) DATE		
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		ECTORS IN 12		
TITLE	VPD	☐ DEI		TITLE			Change	
NAME	CLIFTON, LLOYD M.		121	NAME				
STREET ADDRESS	PAR BRITALLE BLUB ALLA			1 3 STREET ADDRESS				
CITY-ST-ZIP	DELTONA FL			CITY-S				
TITLE	PO	DE		TITLE			Change Addition	
MANAC	EZELL KENMETH C		201	LIA LAT				

2.3 STREET ADDRESS

3.3 STREET ADDRESS

3.4. CITY - ST- ZIP

4.4 CITY - ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

2.4 City-St-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 FITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

DELETE

DELETE

64 CITY-ST-ZIP

14. I 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 arrivate eport is true and accurate and that my signature shall have the same legal effect as if made undor oath; that I am an officer or director of the corpt ation or the receiver principles.

Block 12 or Block 13 if changed or on an atlantifying with a haddress.

1/28/98 40/8/0-125:

FILED

Feb 05 1998 8:00am

Secretary of State

CR2E034 (10/97)

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