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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P94000089559 (6)

Principal Place of Business	Mailing Address	
10319 MOORE ROAD GOTHA FL 34734	PO BOX 197 GOTHA FL 34734	-

FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address PO BOX 197											
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GINDLESPERGER, ROBERT B 10319 MOORE ROAD GOTHA FL 34734 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signals and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signals and the state of the corporation's board of directors. I hereby accept the appointment as registered signals and the state of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors. I hereby accept the appointment as registered affects of the corporation's board of directors.	24	25]	29		30				_	
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SIGNATURE Signature, typed or privided neme of registered agent and title if applicable. (NOTE, Pegistered Agent elgrature required when reintating) DATE	11. Pursuant office or r	to the provisions egistered agent	s of Sections 607.050 , or both, in the State	2 and 6	07.1508, Florida Statu da. Such change was	tes, the abo	by	e-named corpo the corporation	oration submits this statement for the purpose of changing its regist on's board of directors. I hereby accept the appointment as registe	tered ered	
Signature, typed or printed name of registered agent and tiled is applicable. (NOTE, Registered Agent signature required symme reinstating) DATE	SIGNATURE					orida Statu	les	•			
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14. I hereby certify that the information supplied with this filling 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 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 erran attachment with an address.