## 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 # P95000012512 (6)

UPSTART CROW & CO., INC.

<b></b>		
Principal	Place of	Business

Mailing Address

2309 GULF BLVD. INDIAN ROCKS BEACH FL 34635 7090 HIDDEN ACRES WAY SEMINOLE FL 33772-5711

## FILED May 08 1997 8:00am Secretary of State



(Indian Rocks Beach FL 34635)   US		SEMINOLE FL 33772-5711							
						3. Date Incorporated or Qualified 02/14/1995		te of La 1/199	st Report 6
2. Principal P	Place of Pusipess	2a. Mailing Address			<del></del>	4. FE! Number			Applied For
17090	HIDDEN HOPES W	fty 26	J			59-3294684			Not Applicable
Suite Apt	Place of Phisipess Hidden Acres W	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Bequired
City & Stat	te	City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
Zip 33'	172 25 FINELLAS	Zip 29	Couni	try		8. This corporation has liability for in Florida Statutes	ntangible Yes [		er s. 199.032.
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Reg	lstered :	Agent	
MCG	INNIS, WANDA S			ज	Name				
7090	HIDDEN ACRES WAY INOLE FL 34642		8	32	Street Addre	ess (P.O. Box Number is Not Acceptable	e)		
OLM!	INOLE I E OTOTE		<b>E</b>	3	·····		· · · · · · · · · · · · · · · · · · ·		****
			Ē	14	City	<del></del>	FL	85	Zip Code
11. Parenant	to the provisions of Sections 607 050:	2 and 607 1508 Florida Sta	tutes, the abo		named corry	oration submits this statement for the or		chencii	ng its registered
	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change wa ations of, Section 607.0505,	as authorized Florida Statut	by tes.	the corporation	oration submits this statement for the pa on's board of directors. I hereby accep	t the app	ointmen	t as registered
SIGNATURE	Sign dure, typical or printed name of registered age	·		Agent	t signature require	od when reinstating)	DATE		
12.	OFFICERS AND		13.		_ <del></del>	ADDITIONS/CHANGES TO OFFICE	ERS AND		
THILE	D MANAGE ANALOS OF THE	☐ DELETE	1.1 7111.0		j			Char	ige 🔲 Addition
NAME	MCGINNIS, WANDA S UE		1.2 NAM	Œ					
STREET ADDRESS	7090 HIDDEN ACRES WAY		1.3 STRE	EET A	DDRESS				
CHY-ST-ZIP	SEMINOLE FL 34642		1.4 CiTY	-ST-	- ZIP				
TITLE		DELETE	2.1 TITL	E				☐ Char	nge 🔲 Addition
NAME	i e		2.2 NAM	ŧE	1				
STHEET ADDRESS	(		2.3 STA	EET A	ddress				
CITY-ST ZIF	{		2.4 CIT	Y-ST	- ZIP				
TITLE		☐ DELETE	3.1 TITL	E			•	Char	ege 🔲 Addition
NAME			3.2 NAM	1E					
STREET ADDRESS			3.3 STR6	EET A	DORESS				
City-St-Zir			3.4. CrT1	Y-\$1	-ZIP				
THILE		☐ DELETE	4.1 T(TL)	E				Char	nge Addition
NAME			4. 2 NAA	ME	1				
STREET ADDRESS			4.3 STRE	FFT A	DORESS				
CITY - ST - ZIP			4.4 CITY		-				
TITLE		DELETE	5.1 TITU					Char	noe Addition
NAME		La Jenie	5.2 NAM		j				٠٠٠٠ سے
14401411			1	-	DDDEES	•			
CIDELT SPECIAL	i		■ 5.3 STRE	ct i A	DDRESS				
	)		1		i i				
CITY - ST - ZIP		T per eve	5.4 CITY	-51-	i i			T as	Table
CITY - ST - ZIP TITLE		☐ DELETE	5.4 CITY 61 TITLI	- ST- E	i i			Char	nge Additio
STREET ADDRESS CITY+ST-ZIP TITLE NAME		DELETE	5.4 CITY 6.1 TITLI 6.2 NAM	<u>(-St-</u> E 4e	-21P			Char	nge Addition
CITY - ST-ZIP TITLE		DELETE	5.4 CITY 61 TITLI	<u>(-St-</u> E 4e	-21P		40.1	Char	nge Addition

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 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE** 

4-28-97 813-398-4000