

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

APPROVED  
AND  
FILED

97 JUN 26 AM 11:00

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000014485 (3)**  
1. Corporation Name  
**LOW BUDGET, INC.**



Principal Place of Business Mailing Address  
**73 TURKEY ROOST DR  
GREENVILLE FL 32384  
US** **PO BOX 891  
MONTICELLO FL 32345-0891  
US**

3. Date Incorporated or Qualified **02/21/1995** 3a. Date of Last Report **06/13/1996**

2. Principal Place of Business 2a. Mailing Address  
21 **7-B Turkey Roost Dr.** 26 **P.O. Box 891**  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 **Greenville FL** 27  
City & State  
23 **32331** 28  
Zip Country Zip Country  
24 25 **Jefferson** 29 30

4. FEI Number **59-3297696** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75** Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**ARUNDEL, JERRY  
7B TURKEY ROOST DRIVE  
GREENVILLE FL 32331**

10. Name and Address of New Registered Agent  
81 Name **Gerald D. Arundel**  
82 Street Address (P.O. Box Number is Not Acceptable) **7-B Turkey Roost Dr.**  
83  
84 City **Greenville** FL 85 Zip Code **32331**

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **4-30-97**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS		DELETE
TITLE	<b>PTD</b>	<input type="checkbox"/>
NAME	<b>ARUNDEL, JERRY</b>	
STREET ADDRESS	<b>7B TURKEY ROOST DR</b>	
CITY-ST-ZIP	<b>GREENVILLE FL 32331</b>	
TITLE	<b>VD</b>	<input type="checkbox"/>
NAME	<b>ARUNDEL, GORDON</b>	
STREET ADDRESS	<b>49C DUCK POND DRIVE</b>	
CITY-ST-ZIP	<b>GREENVILLE FL 32331</b>	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

600002227346-4  
-07/01/97-01009-021  
\*\*\*\*165.00 \*\*\*\*165.00

*A. Alan*  
**6/24/97**

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

SIGNATURE *[Signature]* DATE **4-30-97 (92) 9990224**

CR2E034 (9/96)