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

PROFIT CORPORATION ANNUAL REPORT

1997

14. I do hereby certify that the Information indicated on the I am an officer or director appears in Block 12 or Blo



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000027884 (2)

NEIGHBORHOOD INVESTMENT CORPORATION

District District Control of Cont												1 111	
Principal Place of Business Mailing Address 14533 POTANOW TR 12319 S. O.B.T. ORLANDO FL 32837 #190									* 1681/1081 1/2 (2/5) 0/1// 28/// 88/// 88///	ABILA 14816	1000 1010		U 1001
					ī.								
ONDANDO FL	32037	30 RLANDO FL 32837											
			•					Ī	3. Date Incorporated or Qualified	3a. D.	ate of Las	st Rep	oorl
]	04/10/1995	08/	22/199	6	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number Applied Fo				
21			26						59-3313847 Not Applicab				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				İ	5. Certificate of Status Desired				ditional
22 City & State				City & State								Requ	
23				28				į	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country			[20]	Zip Country				This corporation has liability for intangible tax under s. 199.032,					
24	25		29	30]		.,		ŀ	Florida Statutes Yes No				99.032,
9. Name and Address of Curren									10. Name and Address of New Registered Agent				
PAR	KER, STEVEN	L				81	Name						
14533 POTANOW TRAIL							Street	Address	dress (P.O. Box Number is Not Acceptable)				
ORLANDO FL 32837							ļ		(
						B 3							
						84	City				85 2	Zip Co	ode.
							1			FL.	.		
office or r	to the provisions registered agent im familiar with,	s of Sections 607 t, or both, in the 5 and accept the c	.0502 and 6 State of Flori Obligations o	07.1508, Florida Sta da. Such change wa f, Section 607.0505,	atutes, the at as authori≱e , Florida Stat	oove d by ules	e-named y the cor s.	d corpora rporation	ation submits this statement for the p is board of directors. I hereby accep	urpose of at the app	f changin pointment	ig its r i as re	registered :gistered
SIGNATURE			_										
	Signature, typod or p	rinled name of registers			NO1L: Registered	d Ago	ont signatur	e required v		DATE			
12.	D	OFFICERS	AND DIREC	DELETE	13. 1.1 TJ	TI E			ADDITIONS/CHANGES TO OFFIC	EHS ANL	DIRECT Chan		IN 12 Addition
NAME	OPPEL, EDV	VARN		A beach	1.1 II						L] Citati	ge (Mudilion
STREET ADDRESS	14533 POTA						I ADDRESS	1					
CITY-ST-ZIP	ORLANDO F						ST-ZIP	1					
TITLE	D			DELETE	2111	_	3(- El)	 			☐ Chan	oe l	Addition
NAME	PARKER, ST	TEVEN L			22 N/	AME		ĺ					
STREET ADDRESS	14533 POTA				2 3 ST	REET	ADDRESS	1					
CHY-ST-ZIP	ORLANDO F	L 32837			2 4 C	1Y-8	ST-ZIP						
TITLE				☐ DELETE	3 1 TF	ΙLF					Chan	ge	Addition
NAME					3 2 N/	ME							
STREET ADDRESS		,			3 3 ST	REET	ADDRESS						
CITY-ST-ZIP							ST-ZIP						
TITLE	:	N.		L_] DELETE	4.1 Ti	LE					☐ Chan	ge (Addition
NAME					4. P. N								
STREET ADDRESS					1		ADDRESS						
CITY-ST-ZIP				Print			ST-ZIP						r
TITLE				☐ DELE1E	5.1 Ti						Chan	ge [Addition
NAME CTOFFE ADDRESS					5.2 N/								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP TITLE				DELETE	5.4 C/ 6.1 T//		31 - ZIP	-			Chan		Addition
NAME					6.1 III						ET PHS()	ង្គ [Magitipi)
STREET ADDRESS							4000000						
SINEEL ADIANESS					6.3 \$1	KEEL	ADDRESS						

us not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the al report is true and accurate and that my signature shall have the same legal effect as if made under eath; that stee creatowered to execute this report as required by Chapter 607, Florida Statutes; and that my name