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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000031920 (8)

JLD OF CENTRAL FLORIDA, INC.

Principal Place of Business Mailing Address							1 - 1 10011001 110 19101 CIPE WOLL HOLD WALL		MUNICIPALITY	DIL 0011 1001	
1608 BOOTH DI SEBRING FL 33		1608 BOOTH DR SEBRING FL 33872-5718									
							3. Date incorporated or Qualified 04/20/1995	3a. Date of Last Report 05/01/1996			
<del></del>	lace of Business	2a. Mailing Address					4. FEI Number			Applied For	
Suite, Apt.	# etc	<b>26</b>					65-0578298			Not Applicable	
22 City & State		27					5. Certificate of Status Desired	\$8.75 Additional Fee Required			
23	y .	28					Election Campaign Financing     Trust Fund Contribution	П		May Be	
Zip	Country	Zip	Сол	untry			8. This corporation has liability for in			d to Fees	
24	25	29	30	•					No	8. 189.V3Z,	
	9. Name and Address of Cu					-	10. Name and Address of New Reg	latered /	Agent		
STAT	iler, Phillip W			81	Name	!					
3200	U.S. 27 S			62	Street	Addre	ss (P.O. Box Number is Not Acceptable	le)		<del></del>	
#306											
SEBF	RING FL 33870			63							
				64	City			FL	85 Zij	p Code	
11 Purcuant t	to the provisions of Sections 607	0502 and 607 1508 Florida Statuto	e the n	boye	2 00000	1 00000	ration submits this statement for the pr		-1		
Office or re	egistered agent, or both, in the S	state of Florida. Such change was as	uthorize	d by	the cor	rporatio	n's board of directors. I hereby accep	t the app	changing ointment a	is registered is registered	
-	m ramiliar with, and accept the o	bligations of, Section 607.0505, Flor	rida Sta	tutes	<b>3</b> ,						
SIGNATURE	Signature: Expest or printed have oil registers	d agent and tile 1 and cable. (NOTE	Registere	d Age	nt signaturi	e requirer	d when reinstating)	DATE			
12.		AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICE		DIRECTO	ORS IN 12	
TITLE	VPS	☐ DELETE	1.1 Ti	TLE		T		· · · · · · · · · · · · · · · · · · ·	☐ Change		
NAME	DALKE, LINDA R		1.2 N	AME							
STREET ADDRESS	1608 BOOTH DR		1.3 \$	TAEET	ADDRESS						
CITY-ST-ZIP	SEBRING FL 33872		1.4 0	ITY-S	r-zip						
TITLE	PT MAGE	☐ DELETE	2.1 TI	TLE					Change	Addition	
NAME	DALKE, JAMES 1608 BOOTH DR		22 N								
STREET ADDRESS	SEBRING FL 33872		4		ADDRESS						
CITY-ST-ZIP TITLE	OEDNING PL 330/2	DELETE	2 4 ( 3.1 Ti		ST-ZIP	<del>                                     </del>		<del></del>	Chann	Addoise	
NAME		Ottere	3.1 H				•		Change	Addition	
STREET ADDRESS					ADDRESS						
CITY-ST-ZIF					T-ZIP						
TITLE		☐ DELETE	4.1 1		11-211	<del> </del>			Change	Addition	
NAME			4. 2 N	AME					_ •		
STREET ADDRESS			4.3 S	TREET	ADDRESS						
CITY-ST ZIP			4.4 C	ITY-S	T - ZIP						
TITLE		DELETE	5.1 Ti	TLE					Change	Addition	
NAME			5.2 N	AME							
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP		T DESCRIP		TY - S	T-ZIP	-				<b></b>	
TITLE		☐ DELETE	6.1 TI			1			Change	Addition	
NAME STOCET ADVIDEOU			6.2 N		ADBRESS						
STREET ADORESS					ADDRESS						
14. I do hereb	by certify that the information sun	plied with this filing does not qualify	6.4 C	exe	motion s	I stated i	n Section 119.07(3)(i), Florida Statutes	. I further	certify th	at the	
Information	n indicated on this annual report	or supplemental annual report is to	ie and a	<b>accu</b>	ırate and	ri that r	ny signature shall have the same legal as required by Chapter 607, Florida St	offect se	if made u	inder oath: the	

Dale 1/11/97 94/3823363