## 5. 2-97 B- 1078 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 # P95000047994 (5)

SILVER SPRINGS WHOLESALE, INC.

Principal Place 3720 N.E. 33RI OCALA FL 344	O STREET	Mailing Address 3720 N.E. 33RD STREET OCALA FL 34479-3100			<b>11</b> 11
				3. Date Incorporated or Qualified 06/16/1995	3a. Date of Last Report 03/19/1996
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-3330346	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State	·····	6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip 24	Country 25	28 Zip	Country 30	Trust Fund Contribution  8. This corporation has liability for in Florida Statutes	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
3720 OCA	CK, DAVID A D N.E. 33RD STREET NLA FL 34471		81 Name 1 82 Street 3 83 84 Cily	McC Vivian 17218. Box Number is Not 3391419 Cala	FL 85 3479
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flority 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 Fortia, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept to obligations of, Scoton 107.0505, Florital statutes.  SIGNATURE    Signature, typed or printed name of registered agent and the it are placed. (NOTE: Registered Agent signature recovered when renstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
12.	OF FICERS AN	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	TUCK, WILLIAM H SR 3720 N.E. 33RD STREET OCALA FL 34471	_ otten	1.2 NAME  1.3 STREET AUDRESS  1.4 CITY - ST - ZIP		Ununge La ricollion
TITLE NAME STREET ADDRESS	D TUCK, GAIL B 3720 N.E. 33RD STREET OCALA FL 34471	DETETE	2.1 TITLE 2.2-NAME 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	D TUCK, DAVID A 3720 N.E. 33RD STREET OCALA FL 34471	☐ DELETE	2.4 CHY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, VIVIAN T 3720 N.E. 33RD STREET OCALA FL 34471	☐ DELETE .	3.4, C(TY-S) - Z(P) 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 C(TY-S) - Z(P)		Change Addition
TITLE NAME		DELETE	5.1 TITLE 5.2 NAME		Change 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 eath; that I am an officer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 if changed, or on an attachment in an address.

61 IDLE

62 NAME

DELETE

5.3 STREET ADDRESS 5.4 DITY-ST-ZIP

....

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

4.24.95

**FILED** 

May 02 1997 8:00am

Secretary of State