

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Apr 22 1998 8:00am
Secretary of State

DOCUMENT # P95000049727 (7)
1. Corporation Name
LITTLE RIVER GENERAL STORE AND TRADING COMPANY



Principal Place of Business Mailing Address
308 N. MAIN ST. 308 N. MAIN ST.
HAVANA FL 32333 HAVANA FL 32333

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/26/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3321625	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent LOVE, JAMES P ROUTE 3, BOX 5272 HAVANA FL 32333				10. Name and Address of New Registered Agent	
81	Name	RITA LOVE			
82	Street Address (P.O. Box Number is Not Acceptable)	RT. 3, BOX 5272			
83					
84	City	HAVANA	FL	85	Zip Code 32333

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 *James P. Love* 4/17/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P LOVE, JAMES P RT. 3, BOX 5272 HAVANA FL 32333	1.1 TITLE	P RITA LOVE
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	SAME
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	V LOVE, RITA RT. 3, BOX 5272 HAVANA FL	2.1 TITLE	V LOVE, JAMES P.
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	SAME
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	A ANDREWS, LAURA P 2725 LEARY LANE TALLAHASSEE FL 32303	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	S HESTER, JOY 1701 ATKAMIRE TALLAHASSEE FL 32301	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 if changed, or on an attachment with an address.

SIGNATURE *Rita Love* 4/17/98 539-16900

CR2E034 (1097)