FILE NOW: FILING FEE	AFTER MAY 1 I	S \$225.00		
PROFIT	FLORIDA DEPA	RTMENT OF STATE		
CORPORATION ANNUAL REPORT	(*) (A)	B. Mortham		
1996	9	ary of State COMPORATIONS		
haliman	nn 5511			
DOCUMENT # P9500 1. Corporation Name  Legruppe C	( <del>-</del>	L		
(tdutbbe (	exter tuc.			
The state of the s				
Principal Place of Business	Mailing Address	key Lake Pd		
	05/20do,	El		
	OT MICO,	32819	3. Date Incorporated or Qualified 3a.	Dale of Last Report
Principal Place of Business     1	2a, Mailing Address	orker Lakeld	4, FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.	or they caree to		Not Applicable \$8.75 Additional
City & State	27 City & State		L	Fee Required
23] 4	28 07 mmdo	, FL	<b>6</b> : Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
.Zip Country 25	29 32819	Country 30	8. This corporation has liability for intangil	
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	J
Dennis Tracey		81 Name		
Dennis Tracey 2104 Hundleigh A Orlando, Te	4.	82 Street Addres	s (P.O. Box Number is Not Acceptable)	
Oxlando, TL		83	The second se	
37835		84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 a	nd 607.1508, Florida Statute	es, the above-named corporation's board	ion submits this statement for the purpose of	of changing its registered office
or registered agon), or both, in the State of Florida familiar with, and accept the obligations of, Species	607.0505, Florida Statutes.	<u> </u>		I II II
Signature (12000 pritted hark of represented agost an		TE: Registered Agent signature required w	Ation reflies abign	<u>10</u> 110 ω
THE GEN. NGP	DIRECTORIS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change XX Addition (\$67)
NAME TODD BLACK		1.2 NAME	court	34 (5)
STREEL ADDRESS SUCH COMO BA # 1 CITY-ST-71P OF LANCE FL 32811			ando FL 32835	
TITLE OF LANCY FL 32EN	DELETE	2 1 TITLE	omas Eosney, V.PTiras	Change Addition
NAM:		22 NAME 0/0	omas Eosrey, V.P. Trens 1625, Turkey Lake Rd	,
STREET ADDRESS CITY-S1-ZIP		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP Dr	lando, Fl 32819	
THE	[] DELETE	3.1 TITLE 6M		Change 🗶 Addition
NAME STREET ADDRESS		3.2 NAME  3.3. STREET ADDRESS ST	of Could by # 1293	
CITY - ST - ZIP			lando, tc 32(11	
TITLE	[] DELETE	4. 1 Title 4.2 Name		Change Addition
STREET ADDRESS		4.3 STREET ADDRESS		
City-SI-7iP	ETI DELETE	4.4 CITY+ST+ZIF	,	
TITLE NAME	DELETE	5 1 TITLE 5.2 NAME	900001835° -05/23/9601003	Change Addition
STREET ADDRESS		5.3 STREET ADORESS	***200.00	-1/04
CHY-SI-ZIP	DELEJE	5.4 CITY-S1-ZIP 6 1 TITLE	Protection and Bright Tour	Change Addition
NAME		62 NAME.		The current of the contract of
STREET ADDRESS		6 3 STREET ADDRESS		16
14. I do hereby certify that the information supplied with	h this filing is voluntarily furni	shed and does not qualify for	the exemption stated in Section 119.07(3)(k	), Florida Statutes. I further
certify that the information indicated on this annual oath; that I am an officer or director of the cerporal appears in Block 12 or Block 13 if changed, or on	tion-or the receiver or trustee	empowered to execute this r	and that my signature shall have the same I report as required by Chapter 607, Florida S	legal effect as if made under tatutes; and that my name
	1 1	Dannie Trace	, ulvlu -	5768
SIGNATURE:	FIINTED NAME OF SIGNING OFFICE	ROR DIRECTOR TO	1 _ 1/10/76 50\	Daytine Phone #