SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500060829 (5)

ORLANDO WORLD DEVELOPMENT CORP.

Principal Place of Business	Mailing Address			
725 MAGNOLIA AVENUE 725 MAGNOLIA AVENUE ORLANDO FL 32803 ORLANDO FL 32803		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28		08/07/1995 4. FEI Number 59-3335720 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	03/06/1996 Applied Fo Not Applied Fo Not Applied Fo Required \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
Zip Country 24 25 9. Name and Address of Curr	29 30	Country	This corporation owes or has pa Personal Property Tax due June Name and Address of New Re	30. Yes No
STONE, STEPHEN M 725 N. MAGNOLIA AVENUE ORLANDO FL 32803		81 Name 82 Street At 83 84 City	ddress (P.O. Box Number is Not Acceptat	FL 85 Zip Code

office or re agent. I as	o the provisions of Sections 607,0302 and 607,1306, Plot egistered agent, or both, in the State of Florida. Such char in familiar with, and accept the obligations of, Section 607	nge was autho 10505, Florida	orized by the corpo Statutes.	pration's board of directors. I hereby accept	the appointment as	registered
SIGNATURE	Signature, typed or printed name of registered agon; and title if applicable.	(NOTE: Page	istored Apont signature to	equired when reinstation)	DATE	
12.			Registered Agent signature required when reinslating) 13. ADDITIONS/CHANGES T		TO OFFICERS AND DIRECTORS IN 12	
TITLE			1.1 TITLE	772577077077077777	Change	Addition
NAME	ANDESRON, ROGER L	•	1.2 NAME		,	_
STREET ADDRESS	725 MAGNOLIA AVENUE		1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32803	ا ر	1.4 CITY-ST-ZIP			
TITLE	STO	ELETE	2.1 TITLE		☐ Change	Addition
NAME	Stone, Stephen M		2.2 NAME			
STREET ADDRESS	725 MAGNOLIA AVENUE		2.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32803		2. 4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE	□ 0	ELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		1	
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE	□ D	ELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			ļ
STREET ADDRESS	•.		4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	D	ELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS		1	5.3 STREET ADDRESS			Ì
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	D	ELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS	:		1
CITY-ST-ZIP	ay again that the information cumplied with this filling door		6.4 CITY - ST - ZIP			

reor reviews certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this anomal 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 observation 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 it changed, or on an amachine of with an address.

8-21-00

FILED

Sep 09 1997 8:00am

Secretary of State