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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 19 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000062850 (9)

CERTIFIED BUSINESS DEVELOPMENT, LIMITED, INC.

| Principal Place of Business Mailing Address            |  |  |                            |                 |   | 1 1001/601 JIS (BIO) BINI ODIH ABUN ODIH OTHO SIILO ISAN LONDI GLIK EDİİ (BƏ)  |
|--|--|--|----------------------------|-----------------|---|--|
| 1202 West Central Blvd.<br>Suite G<br>Orlando fl 32805 |  | 1202 WEST CENTRAL BLVD.<br>SUITE G<br>ORLANDO FL 32805             |                            |                 | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified |  |
| ***************************************                |  |  |                            |                 |   | 08/15/1995   |
| 2. Principal P   | 2a. Mailing Address  | ng Address   |                            |                 | 4. FEI Number Applied For Not Applied For Not Applied For     |  |
| 21 Suite, Apt. #, etc.                                 |  | Suite, Apt. #, etc.  |                            |                 |   | SR 75 Additional   |
| 22   |  | 27   |                            |                 |   | 5. Certificate of Status Desired Fee Required  |
| City & State   |  | City & State   |                            |                 | 6. Election Campaign Financing \$5.00 May Be                  |  |
| 23   |  | 28   |                            |                 | <del></del>   | Trust Fund Contribution Added to Fees  |
| Zip<br>24  | Country 25   | Ζφ<br><b>29</b>  | 30                         | untry           | ,   | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due Juné 30.   Yes No   |
| <u> </u>   | g. Name and Address of Curre   |  | 1901                       | Π               |   | 10. Name and Address of New Registered Agent   |
| TRO  | OTTER, GARY  |  |                            | 81              | Name  |  |
|  | 2 WEST CENTRAL BLVD.   |  |                            | 82              | Street Addr   | ress (P.O. Box Number is Not Acceptable)   |
|  | TE G   |  |                            | 83              |   |  |
| OR   | LANDO FL 32805   |  |                            |                 |   |  |
|  |  |  |                            | 84              | City  | FL 85 Zip Code   |
| 11. Pursuant   | to the provisions of Sections 607.05   | 02 and 607.1508, Florida Stati                                     | utes, the a                | bove            | e-named corp  | poration submits this statement for the purpose of changing its registered   |
| office or re<br>agent. I a                             | egistered agent, or both, in the Stat<br>m familiar with, and accept the obliq | e of Florida. Such change was<br>gations of, Section 607.0505, F   | s authorize<br>Florida Sta | ed by<br>stutes | / the corporat<br>s.  | tion's board of directors. I hereby accept the appointment as registered   |
| SIGNATURE  |  |  |                            |                 |   |  |
| 12.  | Signature, typed or printed name of registered as<br>OFFICERS At               | gent and title If applicable (NO<br>ND DIRECTORS                   | OTE: Registere             | ed Ape          | eni signature requir  | red when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |
| TITLE  | D  | DELETE   | 1.11                       | ITLE            |   | Change Addition  |
| NAME   | TROTTER, GARY  |  | 1.2 6                      | AME             |   |  |
| STREET ADDRESS   | 10771 SATINWOOD CIRCLE   |  | 1.3 \$                     | STREET          | ADDRESS   |  |
| CITY-ST-ZIP  | ORLANDO FL 32825   | DELETE   |                            | ITY-S           | iT-ZIP  | ☐ Change ☐ Addition  |
| TITLE NAME   |  |  | 2.1 7                      | VAME            | ļ   | Citalife Cit Auditori  |
| STREET ADDRESS   |  |  |                            |                 | ADDRESS   | •  |
| CITY-ST-ZIP  |  |  |                            | CITY-S          |   |  |
| TITLE  |  | ☐ DELETE   | 3.1 T                      | ITLE            |   | Change Addition  |
| NAME   |  |  |                            | IAME            |   |  |
| STREET ADDRESS   |  |  |                            |                 | ADDRESS   |  |
| CITY-ST-ZIP<br>TITLE                                   |  | DELETE   | 3.4. U                     |                 | ST-ZIP  | Change Addition  |
| NAME   |  | _  |                            | NAME            |   |  |
| STREET ADDRESS   |  |  | 4.3 \$                     | TREET           | ADDRESS   |  |
| CITY-ST-ZIP  |  |  |                            | ITY-S           | T-ZIP   |  |
| TITLE  |  | DELETE   | 5.1 T                      |                 |   | Change Addition  |
| NAME   |  |  | 1                          | LAME            | *DD0E00   |  |
| STREET ADDRESS  <br>CITY-ST-ZIP                        |  |  | - 1                        | TREET<br>STY-S  | ADDRESS   |  |
| TITLE  |  | ☐ DELETE   | 6.1 T                      |                 | ) - CIT   | Change Addition  |
| NAME   |  |  | 6.2 N                      | AME             |   | · ·  |
| STREET ADDRESS   |  |  | 6.3 S                      | TREET           | ADDRESS   |  |
| CITY-ST-ZIP  | with that the info-  | with this filter store and a -05                                   |                            | HY-S            |   | Cooling 110 D7(2)(i) Cloride Clabutes 15 the good in the the Information   |
| indicated<br>officer or                                | on this annual conort or supplement  | tal annual report is true and ac<br>coiver or trustee empowered to | courata an                 | vd th           | at mu cionatu   | Section 119.07(3)(i), Florida Statutes. I further certify that the information<br>irre shall have the same legal effect as if made under oath; that I am an<br>uired by Chapter 607, Florida Statutes; and that my name appears in |