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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000063324 (4)

CROWN'S WAY SOUTH, INC.

FILED Mar 19 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address									a naminama ing batan aniki amini maniki maliki minda kilida kilida kilida kilida kilida kilida kilida kilida k		
9400 NW 160TH STREET 12 N. 254 TOWER ROAD HAMPSHIRE IL 60140						ND .				DO NOT WRITE IN THIS SPACE	
										3. Date Incorporated or Qualified	
·· <u>···</u>										08/16/1995	
2. Principal I	Place of Busi	ness			Mailing Address					4. FEI Number Applied For	
Suite, Apt	# plo			26	N. 3					59-3339013 Not Applicable	
22	w, etc.		Suite, Apt. #, etc.						5. Certificate of Status Desired Section Fee Required		
City & State				City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Zip Country			Zip Count			ountry	,		This corporation owes or has paid the current year intangible	
24	26			29	30				i	Personal Property Tax due June 30. Yes No	
9. Name and Address of Curren									10. Name and Address of New Registered Agent		
W	NECHENS, I	EUGENE A					81	Name)		
	5 NORTHE	VENUE				82	Stree	Addres	ess (P.O. Box Number is Not Acceptable)		
, o	CALA FL 34	14/0					83				
							84	City		85 Zip Code	
11 Durement	to the provis	lone of Sections	607.0602.ar	d 607	1500 Florido Ctate	مطه مله	2000		d acces	FL 65 ZP COOR	
11. Pursuant to the provisions of Soctions 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											
12.	Signature, typec		ERS AND DI			TE Regist		ent eignatu	re required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T D	0.110			DELETE		TITLE		Τ	Change Addition	
NAME	DICICIL	IA, RONALD A			"		NAME				
STREET ADDRESS		RTH 254 TOWE	R ROAD					ADDRESS			
CITY-ST-ZIP	HAMPS	HIRE IL 60140					CITY-S	_			
TITLE	8		***		DELETE		TITLE		1	☐ Change ☐ Addition	
NAME		ia, judith				2.2	NAME				
STREET ADDRESS		ith 254 towe	r road			2.3	STREET	ADDRESS			
CITY-ST-ZIP	HAMPS	HIRE IL				2.	4 CITY-S	ST-ZIP			
TITLE					DELETE	3.1	TITLE			☐ Change ☐ Addition	
NAME						3.2	NAME			ļ	
STREET ADDRESS						3.3	STREET	ADDRESS			
CITY-ST-ZIP	 				An rei		. City-S	T - ZIP	1		
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NAME							2 NAME				
STREET ADDRESS								ADDRESS		Ϊ	
CATY - \$T - ZAP	 				DELETE		CITY-S	T-ZIP	┼	Change Addition	
NAME					L.J DECCIE					☐ Change ☐ Addition	
		•					NAME	4000000			
STREET ADDRESS								ADDRESS			
CITY-ST-ZIP TITLE	 				DELETE		CITY-S	i-ZIP		☐ Change ☐ Addition	
NAME	1				L. Deteil	1	NAME			C Chaille C Montion	
STREET ADDRESS	ĺ							ADDRESS			
CITY-ST-ZIP	!						CITY-S				

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 roport 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.