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

PROFIT CORPORATION ANNUAL REPORT

1002



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

TREAS	MENT # P9500 URES IN TIME, INC.		)			
Principal Place of Business Mailing Address				A Manager and Malay and a serie and a serie and the series and the	17	
101 VENICE AVE W 101 VENICE AVE W SUITE 11						
SUITE 11 VENICE FL 3	4285	VENICE FL 34285			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address			<b>08/25/1995 4.</b> FEI Number Applied Fo	
21		26			65-0604907 Not Applic	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u> </u>	5 Certificate of Status Decired S8.75 Addition	al
22		27			Fee Required	
City & State	Ð	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	· ·		8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent				81 Name	10. Name and Address of New Registered Agent	
	INGBEIL, ROBERT T JR		,			
341 VENICE AVE W VENICE FL 34285			į	82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
1.	11102 (201200			83		
			ļ	84 City	85 Zip Code	
				'	FL ( )	
SIGNATURE	Signature, typed or printed name of registered a	ON) skiasilqqe II elli bre inng	TE Registered	by the corporation of the second of the seco		
TOLE	DPT OFFICERS AI	ND DIRECTORS  DELETE	13.	T T	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	HODGETTS, LETITIA M	——————————————————————————————————————		ME	E divinge E Au	Union
STREET ADDRESS	1411 GLENEAGLES DR			REET ADDRESS		
CITY-ST-ZIP	Lamit No. of the Address			TY-ST-ZIP		
TITLE	DVS			LE	Change Ad	dition
NAME	ELWELL, NANCY			ME		
STREET ADDRESS	307 WOODINGHAM CT	1		REET ADDRESS		
City-ST-ZIP	VENICE FL 34292	[] DELETE		TY-ST-ZIP	☐ Change ☐ Ad	Idition
TITLE NAME		☐ DELETE	3.1 TIT 3.2 NA	i	☐ Change ☐ Ad	GIUUII .
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DELETE	4.1 101		Change Ad	dition
NAME			4. 2 N	AME		
STREET ADDRESS			4.3 ST	REET ADORESS		
CITY-ST-ZIP		DELETE	_	TY-ST-ZIP	Change Ad	dition
TITLE		□ ottelt	5.1 TII 5.2 NA		L Charige L Ad	umon
NAME STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DELETE	6.1 TI		Change Ad	dition

64CITY-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. On an attachment with an address.

SIGNATURE:

STREET ADDRESS

Letitia M. Hodgetto

3/24/98

941-486-1700

**FILED** 

Apr 01 1998 8:00am

Secretary of State