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

PROFIT CORPORATION ANNUAL REPORT

1997

City - St - ZiP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000068325 (6)

MOUNT DORA TROLLEY, INC.

Principal Place of Business Mailing Address								
340 DOUGLAS DRIVE 340 DOUGLAS DRIVE EUSTIS FL 32726 EUSTIS FL 32726-2677								
					3. Date Incorporated or Qualified	3a. Da	te of Last Re	eport
					08/30/1995	08/	20/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number			plied For
21 Cuito Aust	4 oto	Suite, Apt #, etc.			59-3361536			t Applicable
Suite, Apt. #, etc. 22		27			5. Certificate of Status Desired Fee Required			
City & State	e 	City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Z(p 24	Country 25	Zip 29 3	Cour	itry	This corporation has liability for Florida Statutes		tax under s.	199.032,
	9. Name and Address of Curr				10. Name and Address of New F	tegistered /	agent	
SHA	ARD, BYRON C			Name	YNTHIR S. SH	DRA		
	DOUGLAS DRIVE		-	82 Street Addr	ress (P.O. Box Number is Not Accept	able)		
	STIS FL 32726			1340				
			; 	83				
			.	84 City		200 g	85 Zip (Code
44 6	40-17-20	500 C02 4500 Fb 11- Otto			ustis	FL	<u> </u>	726
office or r	to the provisions of Sections 607.09 registered agent, or both, in the Sta	te of Horida_Such change was au	thorized	ove-named corp by the corporat	poration submits this statement for the tion's board of directors. I hereby acc	ept the app	changing its ointment as	s registered registered
agent. I a	يامر في محسو		da Statu	ites.				
SIGNATURE	Signature, typed or profed name of registered a	SHARD (NOT:	Registered	Agent signature requi	Mean 1-8-97 red when reinstatrol	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 TU	LE			Change	☐ Addition
Name	SHARD, BYRON		1.2 NA	ME				
STREET ADDRESS	340 DOUGLAS DRIVE		1.3 ST	REET ADDRESS				ļ
CITY-ST-ZIP	EUSTIS FL 32726	De Car		Y-ST-7/P				
TITLE	S	DELETE	2.1 TIT				Change	☐ Addition
NAME	SHARD, DORIS		2.2 NAI	· ·				
STREET ADDRESS	340 DOUGLAS DRIVE			REET ADDRESS				
CITY+ST-ZIP TITLE	EUSTIS FL 32726	DELETE	2. 4 CI 3 1 TIT	IY-ST-ZIP LE			Change	Addition
NAME	SHARD, CYNTHIA		32 NA	1		· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS	340 DOUGLAS DRIVE			REET ADDRESS				
CITY - ST-ZIP	EUSTIS FL 32726		3 4. Ci	TY-ST-ZIP				
TITLE	VP	DELETE	4 1 TIT	LE			Change	Addition
NAME	JIMCNEZ, RICARDO		4 2 NA	ME				
STREET AODRESS	340 DOUGLAS DRIVE		4.3 ST	REET ADDRESS				
CITY - ST- 7IP	EUSTIS FL 32726	07.575		Y-ST-ZIP			F 1 6	11100
TITLE		DELETE	5.1 [1]				Change	Addition
NAME			5 2 NA					
STREET ADDRESS			1	REET ADDRESS				
CITY - ST - ZIF TITLE		☐ DELETE	5.4 CIT	Y-ST-ZIP			☐ Change	Addition
NAMÉ		DECETE	6.2 NA					
STREET ADDRESS				REET ADDRESS)

I do 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, or on an attachment with an address.

FILED Jan 15 1997 8:00am Secretary of State

