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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



H ORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000068325 (6)

MOUNT DORA TROLLEY, INC.

## **FILED** May 12 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address					
340 DOUGLAS DRIVE			340 DOUGLAS DRIVE					
EUST18 FL 32726			EUSTIS FL 32728				DO NOT WRITE IN THIS SPACE	
ĺ							3. Date Incorporated or Qualified	
							08/30/1995	
2. Principal P	lace of Business	2a. Mailin	g Address				4. FEI Number Applied For	
21	26						<b>59-3361536</b> Not Applicable	
Suite, Apt.	#, etc		Suite, Apt. #, etc.				SR 75 Additional	
22		27	,				5. Certificate of Status Desired Fee Required	
City & State	9	<del></del>	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution	
Zip	Country	Zφ		Country			8. This corporation owes or has paid the current year Intangible	
24	25	29		30	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curren		Agent				10. Name and Address of New Registered Agent	
SH	ARD, CYNTHIA S.				B1	Name		
340 DOUGLAS DRIVE				62 Street Add		Ct at A	Address (D.O. David, wheels Met Assessable)	
EUSTIS FL 32728			62			Street A	Address (P.O. Box Number is Not Acceptable)	
	-112 1 C 451 54			l li	83			
						<u> </u>		
					84	City	FL   85   Zip Code	
11. Pursuant	to the provisions of Sections 607 050:	2 and 607 150	8 Florida Statut	tes the abi	nve.	-named o	corporation submits this statement for the purpose of changing its registered	
office or r	egistered agent, or both, in the State	of Florida, Suc	h change was	authorized	by	the corp	oration's board of directors. I hereby accept the appointment as registered	
agentia	m tamiliar with, and accept the obliga	uions of, Section	on 607.0505, Fli	orida Statu	ites.			
SIGNATURE	Signature, typed or printed hanse of registers Lage	at read table the areas	76101	I' Desistered	Anco	1 (innot ro r	required when reinstating) DATE.	
12.	OFFICERS AND		(145)1	13.	ngtii	a signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	3		DELETE	1.1 1/11	LE		Change Addition	
NAME	SHARD, BYRON			1.2 NAM	ME		, —	
STREET ADDRESS	340 DOUGLAS DRIVE					ADDRESS		
CITY-ST-ZIP	EUSTIS FL 32726			1.4 CIT				
TITLE	8		DELETE	2.1 TITL		. 71L	Change Addition	
NAME	SHARD, DORIS		C versie	2 2 NA				
STREET ADDRESS	340 DOUGLAS DRIVE					AODRESS		
1	EUSTIS FL 32726							
CITY-ST-ZIP TITLE	T T TO THE OWNER		DELETE	2 4 CIT 3.1 THL		1-ZIP	Change Addition	
NAME	SHARD, CYNTHIA			3.1 IIILE 3.2 NAME		}	Change Addition }	
	340 DOUGLAS DRIVE					*DDotoo		
STREET ADDRESS	EUSTIS FL 32726			3.3 STREET ADDRESS  3.4. City - St - Zip				
CITY-ST-ZIP	VP	···	DELETE	3.4. CIT		I - ZIP	Change Addition	
TITLE	SIMONEZ, RICARDO JA	46763			-		L Grange L Agallon	
NAME		IKNET	5	4. 2 NA				
STREET ADDRESS	340 DOUGLAS DRIVE					ADDRESS		
CITY-ST-ZIP	EUSTIS FL 32726		DELETE	4.4 CITY		- ZIP	Ab	
TITLE			DELETE	5.1 TITE		1	Change Addition	
NAME				5.2 NAN				
STREET ADDRESS				•		ADDRESS		
CITY-ST-ZIP			D 55.55	5.4 C(T)		- Z(P		
TITLE			DELETE	6.1 TITL			Change Addition	
NAME				6 2 NAN	ΛE			
STREET ADDRESS				6 3 STR	EET A	address		
CITY-ST-ZIP				64 CITY	Y-ST	- <b>Z</b> iP		

14. Thereby 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 suppliemental 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 trusted 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.

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