

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90093 007 ***150.00

DOCUMENT # P95000068325

1. Corporation Name
MOUNT DORA TROLLEY, INC.

Principal Place of Business
340 DOUGLAS DRIVE
EUSTIS FL 32726

Mailing Address
340 DOUGLAS DRIVE
EUSTIS FL 32726

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/30/1995

4. FEI Number

59-3361536

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing - ☐ -
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 100 N. ALEXANDER ST.

Suite, Apt. #, etc.

22 M.T. DORA FL.

City & State

23 Lakeside Inn

Zip

24 32757

Country

25 LAKE

2a. Mailing Address

26 340 Douglas Drive

Suite, Apt. #, etc.

27

City & State

28 EUSTIS, FL.

Zip

29 32726

Country

30 LAKE

9. Name and Address of Current Registered Agent

SHARD, CYNTHIA S.
340 DOUGLAS DRIVE
EUSTIS FL 32726

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 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

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan. 03, 1999

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SHARD, BYRON
STREET ADDRESS 340 DOUGLAS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

TITLE ☐ DELETE

NAME SHARD, DORIS
STREET ADDRESS 340 DOUGLAS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

TITLE ☐ DELETE

NAME SHARD, CYNTHIA
STREET ADDRESS 340 DOUGLAS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

TITLE ☐ DELETE

NAME JIMENEZ, RICARDO
STREET ADDRESS 340 DOUGLAS DRIVE
CITY-ST-ZIP EUSTIS FL 32726

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 03, 1999

Date

Daytime Phone #

CR2E034 (11/98)

00850689