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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000079012 (7) DOCUMENT #

JUNIOR COTILLION - THE COTILLION, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			
40 COUNTRY CLUB RD. 40 COUNTRY CLUB					
SHAUMAR FL 32579		SHALIMAR FL 32579		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	77.10 01 7.02
				10/16/1995	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	·	26		NOT APPLICABLE	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country	28 Zip	Country	Trust Fund Contribution	7,0000,000
Zip	25		iol	 This corporation owes or has paid the Personal Property Tax due June 30 	
24	9. Name and Address of Currer		<u> </u>	10. Name and Address of New Regis	
ARNOLD, ROBERT J 81 Name And 19				1.1 Alles	
40 COUNTRY CLUB DO				ress (P.O. Box Number is Not Acceptable)	, , , , , , , , , , , , , , , , , , ,
SHALMAR FL 32579			82 Street Add	Colub Try Club	Koad
			83	J	
			04 0		lee 7 7 Code
			84 City	nalimar	FL 32379
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorida 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.					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE		a TI	(Ma)(M	now 21,	apr. 78
	Signature typed or printed rathe of registred age		Registered Agent signature requi		DATE PURE CTORD IN 40
12.	OFFICERS AN	D DIRLCTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICER	Change Addition
TITLE	ARNOLD, MYRA	- Directi	1.2 NAME		C ontained E victorian
NAME Street address	40 COUNTRY CLUB RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	SHALIMAR FL 32579		1.4 CITY - ST - ZIP		
TITLE	VPT	DELETE	2.1 TITLE		Change Addition
NAME	ARNOLD, ROBERT J		2.2 NAME		
STREET ADDRESS	40 COUNTRY CLUB RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	SHALIMAR FL 32579		2. 4 CITY - ST - ZIP		·
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST-ZIP		T berewe	4.4 CITY-ST-ZIP		Change Ladder
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS		•	5.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.4 C(TY-ST-ZIP		Change Addition
TITLE		[DELETE	61 TALE		C change C voulton
NAME OTRET ARRESTOS			6.2 NAME		
STREET ADDRESS	į.		6 3 STREET ADDRESS		
CITY-ST-ZIP	add that the information and the	the this filing does not an offer for	64 CITY-ST-ZIP	Section 119.07(3Vi) Florida Statutos I fur	ther certify that the information

I nereby 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 informatio 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 trustoc 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 open attachment with an address.