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

P95000083456 (0) **DOCUMENT** #

LEE M. JANZEN, INC.

Principal Place of Business Mailing Address 6108 DARTMOOR CT 7512 DR PHILLIPS BLVD ORLANDO FL 32819 NROBIN ODONNELL DO NOT WRITE IN THIS SPACE ORLANDO FL 32819-5100 3. Date Incorporated or Qualified 10/31/1995 4. FEI Number 2. Principal Place of Business 2a. Marling Address Applied For 21 59-3340816 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution \Box Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name MANOR, TIMOTHY J 215 NORTH EOLA DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 **B3** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE mature, typed or protect came of regenered agent and trainf applicable (NOTE Registered Agent signature required when reinstating) 13. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE Addition TITLE 1.1 TITLE Change JANZEN, LEE M 1.2 NAME 7512 DR PHILLIPS BLVD, 50-906 STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 14 CITY - \$1 - ZIP DELETE Change Addition TITLE 21 THLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change DETETE THLE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition

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 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 enpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ctyrified, or on an attractment with an address.

5.1 THLE

5.2 NAME 5.3 STREET ADDRESS

61 1HLE

6.2 NAME

DELETE

54 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

TITLE NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

76-1128

Change

☐ Addition

FILED

Apr 22 1998 8:00am

Secretary of State