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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000087331 (1)

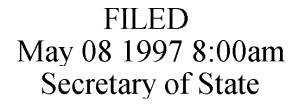
DON SINSABAUGH, INC.

Principa	l Place of	Business

Mailing Address

3924 CYPRESS LANDING NORTH WINTER HAVEN FL \$3884

3924 CYPRESS LANDING NORTH WINTER HAVEN FL 33884-2403





	16 44401		****					Į.			
								3. Date Incorporated or Qualified 11/14/1995	3a. Date o		eport
2. Principal Pi	lace of Busin	ioss	2a	Mailing Address			<u> </u>	4. FEI Number		Ar	plied For
21			26					59-3333258		No	ot Applicable
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$	8.75	Additional
22				27				b. Cermicate of Status Desired		Fee Re	equired
City & Stale				City & State				6. Election Campaign Financing	_ ;	5.00	May Be
23			28	· · · · · · · · · · · · · · · · · · ·	·			Trust Fund Contribution		Added	to Fees
Zip	ļ	Country	L.,	Zip	Co	untry		8. This corporation has liability for it			199.032
24		25	29		30	-1			Yes N		
		and Address of Curren	l Regis	stered Agent				10. Name and Address of New Re	gistered Age	nt	
	abaugh, i					81	Name				
		LANDING NORTH				82	Street Ad	dress (P.O. Box Number is Not Acceptab	le)		
WINT	TER HAVEN	FL 33884				L			·		
						83					
						84	City		F1 8	5 Zip	Code
11. Pursuant t	to the provis	ions of Sections 607.050	2 and 6	07.1508. Florida Statute	es, the a	Jl	e-named co	progration submits this statement for the pr		naina il	s registered
office or re agent. I a	egistered ag m familiar wi	ent, or both, in the State th, and accept the obliga	of Flori itions o	da. Such change was a f, Section 607,0505, Flo	authoriza orida Sta	ed by atutes	the corpor s.	rporation submits this statement for the p ation's board of directors. I hereby accep	t the appoint	nčnt as	registered
SIGNATURE	Signature, typed	or printed name of registered age	nt and title	elfapplicable (NOTE	fingister	ed Age	nt signature req	plired whon reinstaling)	DATE		
12.		OFFICERS AND) DIRE		13			ADDITIONS/CHANGES TO OFFIC			
TITLE	PD			☐ DELETE	1.1	111LE				Change	Addition
NAME		JGH, DON G			1.2	NAME					
STREET ADDRESS		ress landing n			1.33	STREET	ADDRESS				
CITY-ST-ZIP	WINTER H	IAVEN FL 33884			1.4	CITY-S	1-21P				
TITLE				☐ DELETE	2.1	TITLE				Change	Addition
NAME					221	NAME	1				
STREET ADDRESS					23	STREET	ADDRESS				
CITY-ST-ZIP					2.4	CITY-S	ST - ZIP				
TITLE				☐ DELETE	3.1	TIFLE				Change	Addition
NAME					3.21	NAME					
STREET ADDRESS					3.3	STREET	ADDRESS]				
CITY-ST-ZIP					3.4.	CITY-S	ST-ZIP				
TITLE				DELETE	4.1	TITLE				Change	Addition
NAME					4.2	NAME					
STREET ADDRESS					4.33	STREET	ADDRESS				
CITY-ST-ZIP					4.41	CITY-S	I-ZIP				
TITLE	••	······································		DELETE		HILF				Change	Addition
NAME					5.21	NAME					
STREET ADDRESS							ADDRESS				
CITY-ST-2IP					1	CITY-S	1				
TITLE				DELETE		lill£	· •"			Change	Addition
NAME						NAME			<u></u>		
STREET ADDRESS	j -						ADDRESS				
CITY-ST-ZIP					6.4	CHIY-S	1-719				

4. 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 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.

SIGNATURE:

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941-325-9729