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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000090123 (7)

PHOENIX ENTERPRISES OF CENTRAL FLORIDA, INC.

Principal	Place of	Business
383 STILL SANFORD		

Mailing Address

383 STILL FOREST TERR SANFORD FL 32771-8367

## FILED May 19 1997 8:00am Secretary of State



3a. Date of Last Report

05/01/1996

3. Date Incorporated or Qualified

11/20/1995

2. Principal P	ace of Business 2a. Mailing Address			4. FEI Number		[ Ac	oplied For	
21		26			59-3342989	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 / Fee Re		
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t		
Zip 24	Country 25	Ζφ 29	Country 30		8. This corporation has liability for int	langible tax under s Yes \[ \] No	199.032,	
471	9. Name and Address of Curre		1901	10. Name and Address of New Registered Agent				
HOLT, JOHN H 383 STILL FOREST TERR SANFORD FL 32771		82	81 Name					
			84	City		er Zin	Code	
			84	City		FL  85   Zip (	C000	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the State of familiar with, and accept the oblig	02 and 607 1508, Florida Statu of Florida. Such change was lations of, Section 607.0505, Fl	les, the above authorized by orida Statules	named corp the corporal	poration submits this statement for the pulion's board of directors. I hereby accept	rpose of changing it the appointment as	s registored registered	
	Signature, typod or printed name of registered ag			nt signature requir	ed when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	D	☐ DELETE	1.4 THLE	ļ		☐ Change	Addition	
NAME STREET ADDRESS	HOLT, JOHN H 383 STILL FOREST TERR		1.2 NAME 1.3 STREET	ADDRESS				
CITY-ST-ZIP	SANFORD FL 32771		1.4 CITY- S	- Y				
TITLE		DELETE	2.1 11TLF			Change	Addition	
NAME			2.2 NAME	Ĭ		214		
STREET ADDRESS			2.3 STREE1	ADDRESS				
CITY-ST-ZIP			2. # CITY - S	n-ziP				
TITLE		DELETE	3.1 TITLE			Спалде	Addition	
NAME			3.2 NAM£	ł				
STREET ADDRESS			3.3 STREET	ADDRESS	•			
CITY-ST-ZIP	1		3 4. CITY~ S	1 - ZIP				
TITLE		DELETE	4 1 10LE			☐ Change	Addition	
NAME			4. 2 NAMÉ					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY - S	1 - 7 P				
TITLE		DELETE	5 1 THLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP,			5.4 CHY-S	I - ZIP				
TITLE		DELETE	61 TITLE			☐ Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			G.3 \$TREET	ADDRESS				
CITY-ST-ZIP			64 CITY-S	]				
	by certify that the information supplied	d with this filing does not qual			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 challed, or on an attachment with an address.

CICMATUDE.

CKINGUS IN QUIELI

4-30-92 402-324-8815