## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State  1996  DIVISION OF CORPORATIONS						
DOCUM	1ENT # <b>P9500</b>	0094197	(7)			
	ET SERVICES OF CENTR	AL ELOBIDA INC	•			
INIENN	ET SERVICES OF CERTIF	AL FEORIDA; INC	,.			
Principal Place of	of Business	Mailing Address				18ffi 80410 (811) 41864 HALB IDINE 1881 HARI
861 WEST MORSE BLVD. SUITE 150 WINTER PARK FL 32789		861 WEST MOR	RSE BLVD.			
		Suite 150 Winter Park	FL 32789		3. Date incorporated or Qualified 12/12/1995	3a. Date of Last Report
2. Principal Piac	ce of Business	2a. Mailing Addre	oss		4. FEI Number 59-3349813	Applied For Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #	. etc		5. Certificate of Status Desired	\$8.75 Additional
22		27				- Fee Hequired
23	<del></del>	Oity & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Ζιρ	ļ	Country	8. This corporation has liability for Horido Statutes X Yes	
24	25 9. Name and Address of Curre	29 ont Registered Agent	30	T	Horida Statutes X Yes  10. Name and Address of New F	
	S, Italie Bild Address of Colife	. It flogious a rigori		81 Name	- 120 - 121 <u>- 121 - 121</u>	
YOUNG.	WALTER R JR			82 Street Ac	Idress (P.O. Box Number is Not Acceptat	ole)
861 WES	t morse blvd.					and Theory Property
SOILE 190				83		
WINTER PARK FL 32789				84 Oity		FL 85 Zip Code
or registere familiar with SIGNATURE	ad agent, or both, in the State of Fic n, and accept the obligations of. Se Sunative types or printed name of registral large	inda, Siich change was otion 607,0505, Florida ertantsteilsbuckse	authorized by Statutes.	the Corporation siti judesul Ayer Esignature (o)		iointment as registered agent. I am:  GAT:  ICERS AND DIRECTORS IN 12
12.	OFFICERS A	NO DIRECTORS  DE	t .E. 1 E	13.	0.70	Change Addition
NAME	YOUNG, WALTER R			1.2 NAME	Young, Walter R Jr	-, '
STREET ADDRESS	861 WEST MORSE BLVD.			13 STREET ADDRESS	doored'	
CITY-ST-ZIP	WINTER PARK FL 32789			1.4.C(F) + \$1 - Z(F)		
TITLE		□ DEI	ETE	2 1 11/11	D	Change 🙀 Addition
NAME				22 NAME	Grenald Staral  BLI wast Morse Blud	
STREET ADDRESS				2.3 STREET ADDRESS C	winterfack FL 32	วธา
CITY - ST - ZIP		30 🔲 DE	LETE		D	Change Addition
NAME		_		3.2 NAME	States Marchi	• •
STREET ADDRESS				33 STREET ADDRESS	steven Marchi 861 west more Blud Winter Rusk FL 32	m0
CITY - ST - ZIP				3.4 CITY - ST - 7IP	Winter RIPL FL 32	789
THILE		☐ DE	LFTE .	4 1 111.7		Change Addition
NAME				4 2 NAMi		
STREET ADORESS				4.3 STRUET ADDRESS 4.4 City - St - ZiP		
CITY-ST-ZIP TITLE			LETE	5 1 11 LF		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS		
CITY-ST-ZIF		,		5.4 CiTo +SI + ZiF		Chaca: Addition
TITLE		OE	LETE	6 1 101LE		Change Addition
NAME				62 NAME		
STREET ADDRESS				6.3 STHEE! ADDRESS		
CITY - ST - ZIP	<u></u>			6.4 CHTY - ST - ZIP	6. for the exercation stated in Section 11	9.07/3//W. Florida Statutes, Lifurther

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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. SIGNATURE AND TYPED OF PRINTED PLOT SIGNING OFFICER OR DIRECTOR JOURS JT 5/20/96 407 6444.9901

SIGNATURE:

CR2E034 (12/95)