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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000097099 (2)

 Corporation N 		•	•			
SELLERS ENTERPRISES, INC.						
ncipal Place o	of Business	Mailing Address	,			
17 REDBIRD R		317 REDBIRD ROAD BONIFAY FL 32425				
Old Hill Co.				3. Date incorporated or Qualified 3a. Date of Last Report 12/26/1995		
Principal Plac	ce of Business	2a. Mailing Address		4. FEI Numiher Applied F		
		26		Not Appl		
Surte, Apt. #, etc.		Suite, Apt. #. etc.		5. Certificate of Status Desired Fee Required		
Oity & State		City & State		6. Election Campaign Financing \$5.00 May 8 Trust Fund Contribution Added to Fee		
Z ip	Country	28	Country 30	This corporation has liability for intangible tax under s 199.03: Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Registered Agent		
	5. Hattio 2110 - 1		81 Name	9		
LAKE, RO	¥ A E00		82 Street	t Address (P.O. Box Number is Not Acceptable)		
	T VIRGINIA AVE.					
BONIFAY FL 32525			63			
4			84 City	FL 85 Zip Code		
SNATURE .	Signature by endor protect in a recontregion of	Apriladite takende	go Fe - Register of Agent Signatin	corporation submits this statement for the purpose of changing its registere 's board of directors. Thereby accept the appointment as registered agent when the street most feet. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
		AND DIRECTORS	13. 1 1 TiT.E	Change A		
F	D	☐ DEFELE	1.2 NAME	Jennifer Bellers Bonifay, The Bayas		
ME .	SELLERS, JAMES 317 REDBIRD ROAD		1.3 STREET ADDRESS	317 Reabird Rd		
EET AUDRESS Y-ST-ZIP	BONNFAY FL 32425		14 CITY - ST - ZIP	Bonifay, Fr 32425		
F - 51 - 21P	DOING AT TE GEVEN	DELETE	2 1 Till. E	Change A		
ME			2.2 NAME			
SE SS			2.3 STREET ADORES	S		
Y - ST - 71P		DELETE	2.4 Cl7Y - S1 Zl2 3.1 TULE	Change A		
LF			3.2 NAME			
ME Reft adoress			3.3 STREET ADDRES	ss		
Y-ST-ZIP	ĺ		3.4 CHY ST-ZIP			
LE		☐ DELETE	4 1 TITLE	Change /		
ME			4.2 NAME			
REET ADDRESS			4.3 STHEET ADDRES	S		
TY-ST-ZIP		DELETE	4.4 CITY - \$ 26' 5 1 TILLE	600001824416 -05/16/9601041001Change		
TLE		□ ottere	5.2 NAME	***200.08		
AME			5.3 STREET ADDRES			
IREET ADDRESS			5.4 City - ST_ZIP			
iTY-ST-ZIP	 	[] DELETE	6 1 TITLE	Change Change		

6 4 City - ST-ZIP

SIGNATURE:

14. I do hereby certify that the information supplied with this filtro certify that the information indicated on this annual report of so cath; that I am an officer or director of the corporation of the appears in Block 12 or Block 13 it phanged, or on a gracific and the corporation of the appears in Block 12 or Block 13 it phanged.

NAME STREET ADDRESS

CITY - S1 - ZIP

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

hed and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes 1 further lat report is true and accurate and that my signature shall have the same legal effect as if made under a encountried to execute this report as required by Chapter 607, Florida Statutes, and that my name

904-547-9227