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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600000555 (8)

Principal Place 101 NORTH W SUITE 108 DELAND FL 3	Mailing Address  101 NORTH WOODLAN SUITE 106 DELAND FL 32720	H WOODLAND			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified
A Delevioral Di	land of Divinos	Total Marillania Andreas				01/02/1996
2. Principal Place of Business		2a. Mailing Address				4. FEI Number Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-3357400   Not Applicable   \$8.75 Additional	
22		27			6. Certificate of Status Desired Fee Required	
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country 25	Z(p	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Curre		[30]	Τ		10. Name and Address of New Registered Agent
CO	OK, MICHAEL J			81	Name	
	NORTH WOODLAND			82	Street A	Address (P.O. Box Number is Not Acceptable)
	ITE 106					
DE	LAND FL 32720			83		
				84	City	FL 85 Zip Code
agent. I ai	m familiar with, and accept the oblig Signature, typed or prefer hammol registered as	gations of, Section 607.0505, F	lorida Sta	tutes.		corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered required when reinstaling)  DATE
12.	OFFICERS AT	VD DIRECTORS DELETE	13. DELETE 11 TO		<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	COOK, MICHAEL J		1.2 N			E. Onlings E. Flourion
STREET ADDRESS	2075 LEMON STREET		1.3 STREET ADDRESS		DDRESS	
CITY-ST-ZIP	DELAND FL 32720			ITY-ST	- ZIP	
TITLE	V8	DELETE	2.1 7	ITLE		☐ Change ☐ Addition
NAME	******			2.2 NAME		
STREET ADDRESS	2075 LEMON STREET	2075 LEMON STREET DELAND FL 32720			DDRESS	
CITY-ST-ZIP TITLE	DELAND PL 32/20	DELETE	3.1 7	CITY-ST	- [P	Change Addition
NAME			3.2 N			
STREET ADDRESS	MESS		3.3 STREET ADDRESS		DDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		- ZIP	
TITLE	I I			4.1 TITLE		Change Addition
NAME			4.21			***
STREET ADDRESS					DDRESS	
CITY-ST-ZIP TITLE				4.4 CHY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME	-		5.2 NAME			
STREET ADDRESS			5.3 S	TREET A	DORESS	
CITY-ST-ZIP			5.4 CITY-S		- ZiP	
TITLE		DELETE	6.1 TITLE		Γ	Change Addilion
NAME			6.2 N			
STREET ADDRESS			<b>.</b>		DORESS	
City-St-ZiP	erlify that the information Jumphed	with this filing does not qualify		ITY-\$1. empti		d in Section 119 07(3Vi). Florida Statutes, I further certify that the information
indicated officer or of Block 12 of	on this annual report or supplement director of the corporation of the re- or Block 13 if changed, or on a path	al annual report is true and ac seiver or truster; en powered to achinient with the aldress	curale an	d thai this re	my signa	d in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607./Florida Statutes, and that my name appears in