## 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

## POCUMENT # **P96000004320 (3)**

MMLW PROPERTIES, INC.

**FILED** May 07 1997 8:00am Secretary of State

•	C OI Basilloss	Milling Macross				
250 S. PARK AVE. SUITE 600 WINTER PARK FL 32789		250 S. PARK AVE. SUITE 600 WINTER PARK FL 32789-4388		Date Incorporated or Qualified	3a. Date of Last Report	
					01/12/1996	Sa. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address	<del>.</del>		4. FEI Number	I Applied For
21		26 114 w. Sturtevant St.		59-3355665	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		3. Certificate of Statos Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	, , , , , , , , , , , , , , , , , , , ,	
<b>23</b> Zip	Country	28 Orlando, 1	Countr		Trust Fund Contribution	Added to Fees
24	25	29 32804	30	у	8. This corporation has liability for in	intangible tax under s. 199.032, Tyes - Ti No
9. Name and Address of Current Registered Agent					10. Name and Address of New Re	
COF	PORATION SERVICE COMPANY		81	Name		
1201 HAYS STREET TALLAHASSEE FL 32301-2525			6,	82 Street Address (P.O. Box Number is Not Acceptable)		Jey
			84	SIROULA	ddress (P.O. Box Number is Not Acceptati	ne)
. ,,	<del> </del>		83	3		
			84	City		or Zio Codo
			6.	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the above	ve-named c	corporation submits this statement for the p	urpose of changing its registered
agent. I a	m familiar with, and accept the obliga	lions of, Section 607.0505, F	aumonzea b Iorida Statute	y me corpt es.	oration's board of directors. I hereby accep	or the appointment as registered
SIGNATURE						
	Signature, typod or printed name of registered agen			gent signature r	equired when reinstating)	DATE DIDECTOR IN 12
12. TITLE	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	MAGRUDER, G. BROCK SR. MI		1.1 TITLE 1.2 NAME			Change [] Addition
STREET ADDRESS	250 S. PARK AVE., STE. 200			1 ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789			ST-ZIP		
TITLE	D	DITETE 21TH		51 · ZIF		Change Addition
NAME	ALLANDER A SPACE IN LAR		2 2 NAME			
STREET ADDRESS	250 S. PARK AVE., STE. 200			T ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		2 4 CITY	-		
TITLE	D DELETE		3111111			Change Addition
NAME	LEHR, JOHN M.D.		3.2 NAM!			
STREET ADDRESS	250 S. PARK AVE., STE. 200		3.3 STR£E	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	-S1-ZIP		
TITLE	<del>-</del>		4.1 TOLE	- T		Change Addition
NAME	WHATLEY, THOMAS R JR.		- 4. 2 NAMI	:		
STREET ADDRESS	250 S. PARK AVE., STE. 200			1 AUDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		4 4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5 1 TITLE	1		Change Addition
NAME			5.2 NAME	- 1		
STREET ADDRESS			5.3 STREE	LADDRESS		
CITY-ST-ZIP		fifite	5.4 C(1)Y	\$1-7IP		T Charter T Lawre
TITLE		DELETE	G.1 TITLE			Change Addition
NAME			6.2 NAME	- 1		
STREET ADDRESS			1	1 ADDRESS		
CITY-ST-ZIP	<u> </u>		64 CITY-	ST-ZIP		

14. 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 or supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the feece-ver or trusted 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.