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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 25 1997 8:00am

Secretary of State

Secretary of State

1997

SIGNATURE:

DIVISION OF CORPORATIONS

DOCUMENT # P9600005373 (1) ROY HUNTER, INC.								
Principal Place of E	Rusiness	Mailing Add	058					
3041 CLEVELAND HEIGHTS BLVD. LAKELAND FL 33803-4169		3041 CLEVELA	3041 CLEVELAND HEIGHTS BLVD. LAKELAND FL 33803-4189					
						3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1996		
2. Principal Place of Business		f	2a. Mailing Address 26			4. FEL Number Applied Fo Not Applied Fo Not Applied Fo		
Suite, Apt. #, etc		Suite, Ap	Suite, Apt. #, etc.			5 Certificate of Status Desired S8.75 Additiona		
City & State			City & State			Fee Required  6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip 24	Country Zip 29		Coun 30	try	8. This corporation has liability for intangible tax under s. 199.03; Florida Statutes	2,		
	. Name and Address of C	errent Registered Age	nt		al N	10. Name and Address of New Registered Agent		
	, ROY B EVELAND HEIGHTS BLV ID FL 33803-4169	D.			Name Street	t Address (P.O. Box Number is Not Acceptable)		
				_	4 City	85   Zip Code		
office or regist agent. Lam far	e provisions of Sections 607 lered agent, or both, in the miliar with, and accept the o	State of Florida. Such o	hange was	authorized	by the corp	d corporation submits this statement for the purpose of changing its register reporation's board of directors. I hereby accept the appointment as registered	red ed	
	lure, typed or printed name of register		(NO)		Qent signature	re required when reinstating) DATE.		
12. The	OFFICERS	S AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  P/VP/S/T  Additional Change Addit	lition	
NAME		_	1 000010	1.2 NAM		17,717,571	inion	
STREET ADDRESS				1.3 STRI	ET ADDRESS	Roy Hunter 3041 Cleveland Heights Blvd		
CHTY - ST - ZiP				1.4 CiTY	-ST-ZIP	Inkoland FI 22002 4160		
TITLE			] DELETE	2.1 TITL	E	Change Add	lition	
NAME				2.2 NAM				
STREET ADDRESS					ET ADDRESS			
CHY-S1-ZIP THEE			DELETE	2. 4 CIT 3.1 TITU	Y-ST-ZIP	☐ Change ☐ Ado	lition	
NAME		2	•	3.2 NAM				
STREET ACORESS				3.3 STR	ET ADDRESS			
City - S1 - ZiP				3.4. CIT	(-ST-ZIP			
TITLE			DELETE	4.1 TITL	E	Change Ado	lition	
NAME [				4. 2 NAM	AE			
STREET ADDRUSS				4.3 STR	EET ADDRESS			
CITY - S1 - 7IP			DELETE		-ST-ZIP	[] Change [] Ado	lilice	
TillE		l	ן טנונינ	5.1 TIEL		L'1 cuaige L'1 and	IIIIO(I	
NAME STREET ADDRESS				5.2 NAM 5.3 STRI	et address			
CITY - ST - ZIP				i i	-ST-ZIP			
THE			DELETE	61 TITL		Change Ado	Sition	
NAME				6.2 NAM	E			
STREET ADDRESS				6.3 STR	ET ADDRESS			
CITY - ST - ZIF	***************************************				-ST-ZIP			
information inc	erlify that the information sup ficated on this annual report of director of the corporations ock 12 or Black 13 frontange	t or supplemental annu	ial report\s istee emploi	true and ac vered to ex	xemption s curate and ecute this r	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the d that my signature shall have the same legal effect as if made under oath, report as required by Chapter 607, Florida Statutes; and that my name	that	

AHULLIRED President 1-17-97 (941) 682-8220

NING OFFICER OF DIRECTOR

Date

Da