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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # P96000008097 (3)

RIDGEWOOD ENTERPRISES, INC.

641 S RIDGEWOOD 641 S RIDGEWOOD ORLANDO FL 32803 ORLANDO FL 32803 3. Date Incorporated or Qualified 3a. Date of Last Report 01/22/1996 2. Principal Place of Business 2a. Mailing Address X Applied For Not Applicable 26 NONE 21 Suite, Apt #, etc. Suite, Apt #, etc. \$8.75 Additional 6. Certificate of Status Desired \mathbf{V} Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Ζıp Country Zip This corporation has liability for intangible tax under s. 199.032, 29 30 Florida Statutes Yes No 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name **HUSKINS, TIM** 641 S RIDGEWOOD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32803 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) OFFICERS AND DIRECTORS 12. 13. Change ___ Addition DELETE 1.1 TITLE D THE CR2E034 NAME **HUSKINS. TIM** 1.2 NAME 641 S RIDGEWOOD 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32803 1.4 CITY-ST-2IP CITY-ST-ZIP Change DELETE Addition HIGH 2.1 TITLE HUSKINS, TIM 2.2 NAME NAME 641 S RIDGEWOOD 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32803 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME ٠, NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZiP Addition DELETE 4.1 TITLE BILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZiP DELETE Change Addition 5.1 TITLE THE NAME 5.2 NAME 500002186195 5.3 STREET ADORESS STREET ADDRESS -05/21/97--01022--002 CITY: ST-ZIF 5.4 CITY-ST-ZIP <u>***165.00</u> Change Addition DELETE TOLE 6.1 TITLE 400002186194 6.2 NAME NAME -05/21/97--01022--001 6.3 STREET ADDRESS STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIF

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 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. TIM HUSKINS ORLANDO, FLORIDA and 29

***8.75

FILED

May 09 1997 8:00am

Secretary of State