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

DOCUMENT # P96000016176 (5)

APPEL RESOLUTION, INC.

Principal Place of Business

Mailing Address

FILED May 21 1997 8:00am Secretary of State

407/644-9319



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2221 LEE ROAD STE 17 WINTER PARK FL 92789					2221 LEE ROAD STE 17 WINTER PARK FL 32789-1872											
											3. Date Incorporated or 02/19/1996	Qualified	3a. Dal	te of L	ast R∈	port
2. Principal Pl	lace of Busin	28	2a. Mailing Address						4. FEI Number			>	Apı	olied For		
21				26											Not	Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Status D	esired		• -	-	dditional Julred
City & State					City & State						6. Election Campaign Fit Trust Fund Contribution	_				May Be
Zip	Country 25				Zip Coul 29 30			Country	/		8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes ☐ Yes ☐ No					
<u> </u>	9. Name		ddress of Curre		stered A	gent	[30]				10. Name and Address					
THO	MAS, BRY					· · · · · · · · · · · · · · · · · · ·		81	Na	ame						
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11. Pursuant I office or re agent. I as	to the provis egi ste red ag m fam iliar w	ions of ent, or ith, and	Sections 607.050 both, in the State accept the oblig	02 and (o of Flor pations o	607.1508, ida. Such of, Section	Florida Stati change was 607.0505, F	ites, the author forida \$	abov ized b statute	e-na y the s.	med corpo corporatio	oration submits this stateme on's board of directors. The	nt for the p reby accep	urpose of the appo	chang pintme	ing its nt as i	registered egistered
SIGNATURE	Clanster, tenad	Los Auntos	I name of registered ay	out and tel	a if anylood	lo ZNIC	M. Foois	lered An	ocl e a	unalura can ilrad	d when reinstating)		DATE			
12.	Signature, type o	Ca printed	OFFICERS AN			(140		3.	1139	marche received	ADDITIONS/CHANGES	TO OFFIC		DIREC	CTOR	3 IN 12
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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 suppliemental anguar report is rue 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 exporation or the receivery frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

CIONATURE.