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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 08 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000017084 (0)

CREIGHTON & LOTT, P.A.

SIGNATURE:

Principal Place of Business	Mailing Address		-	BLOK HIBIK KODIK BUNDA HERIK BIDI INDI
1228 FAIRFAX DRIVE LAKELAND FL 33811	1228 FAIRFAX DRIVE LAKELAND FL 33811			
			3. Date Incorporated or Qualified 02/23/1996	3a. Date of Last Report N/A
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
50 Lake Morton Dri		30X 34	59-3364521	Not Applicable
Suite, Apt. #, etc	Surte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Lakeland, Florida		rida	Trust Fund Contribution	Added to Fees
Zip Country 24 33801 25 US	/ Zip	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No
	ss of Current Registered Agent		10. Name and Address of New Re	jistered Agent
LOTT, LISA B		81 Name Roberta	a J. Creighton	
1228 FAIRFAX DRIVE LAKELAND FL 33811		82 Street Addre	ess (P.O. Box Number is Not Acceptab Morton Drive	le)
		83		
	,	84 City Lakelar		FL 85 Zip Code 33801
SIGNATURE LIVEU		norized by the corporation of the statutes.  Derta J. Crespistered Agent signature require	eighton ed when reinslating)	DATE
	FFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
THE D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME CREIGHTON, ROBEI		1.2 NAME		
STREET ADDRESS 1767 MAHAFFEY CI		1.3 STREET ADDRESS		
CITY-ST-ZIP LAKELAND FL 33813	J DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME LOTT, LISA B	_ otten	2.2 NAME		
SIREEL ADDRESS 1228 FAIRFAX DRIVI	E	2.3 STREET ADDRESS		
CITY-SI-ZIP LAKELAND FL 3381		2. 4 CITY-ST-ZIP		
THE	☐ DELETE	3.1 TITLE		Change Addition
NAME:		3.2 NAME		•
STREET ADDRESS		3.3 STREET ADDRESS	·	
C+TY - S1 - Z(F)	Double	3.4. CITY-ST-ZIP		Change Addition
TITLE	☐ DELETE	4.1 TITLE		CT civilds CT volume
NAME		4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS CITY+ST-7IP		4.4 CITY - ST - ZIP		
TILLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
C(1Y+S1+ZIF		5.4 CITY - ST - ZIP		
TITLE	T NEVETE			Change Addition
1	DELETE	6.1 TITLE		
NAME	["] DETEIF	6.2 NAME 6.3 STREET ADDRESS		

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 thic 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 Flock 13 if changed, or once attachment with an address.