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 # P96000027795 (9)

MARY LEE ENTERPRISES, INC.

Principal Place of Business

Mailing Address

3109 WYNSTONE CT. SEBRING FL 33872 3109 WYNSTONE CT. SERRING FL 33872-471

FILED May 09 1997 8:00am Secretary of State



SEBRING FL 3	3872	SEBRING FL 33872-4713							
						3. Date Incorporated or Qualified 03/25/1996	3a. Da	te of Last F	Report
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	·	A	oplied For
21 7862 1	West Irlo Bronson	26				65-0656372		. N	ot Applicable
Sulte, Apt.	#, etc. Highway	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
	mmee, Florida	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 347	Country 25 USA	ZIP 29	Cour	itry		This corporation has liability for i Florida Statutes	ntangible Yes		i. 199,032,
	9. Name and Address of Current					10. Name and Address of New Re			
MAC	BETH, J. ROSS		1	B1	Name				
	3 US 27 S.		- h	B2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
SEB	RING FL 33870			83					
			l.		City	· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
		F-1-1-14-1					- FL	1.1.	
11. Pursuant office or e agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State (am familiar with, and accept the obliga	t and 607.1508, Florida Statu of Florida. Such change was tions of, Section 607.0505, F	utes, the ab- s authorized Florida Statu	ove-r by ti ites.	named corpo he corporation	oration submits this statement for the p on's board of directors. I hereby accep	urpose of of the appo	changing i pintment as	ts registered registered
SIGNATURE									
	Signature, typed or printed name of registered ager			Agent	signature require	d when reinstaling)	DATE	DIDENTAL	20 11 10
12. TITLE	OFFICERS AND	DELITE	13. 1.1 JH	ſ		ADDITIONS/CHANGES TO OFFIC	LRS AND	Change	Addition
NAME	President	<u></u>	1.2 NAM						[_] Manipor
STREET ADDRESS	David L. Kragt		•		DDRESS				
CITY-ST-ZIP	7862 West Irlo Brong Kissimmee, Florida	an Highway	1.4 CIT						,
TITLE	Secretary/Treasurer	Director Dillie	2.1 7(1)		215			Change	Addition
NAME	Mary Lee Kragt		2.2 NA1		}				
	3109 Wynstone Court		2.3 S1F	REET AL	DDRESS				. 4
CITY-ST-ZIP	Sebring, Florida 3:	3872	2. 4 CIT	Y-\$1-	-71P				
TITLE		DELE TE	3.1 1111	E				Change	Addition
NAME			3.2 NAM	ΔE					į
STREET ADDRESS	ļ		33 STR	EET AC	DIDHESS				i
CITY-ST-ZIP			34 00	Y - S1 -	- ZIP				
TITLE		DELFTE.	41 TITE	.F				☐ Change	Addition
NAME			4 2 NA	ME					
STREET ADDRESS					DDRESS				
CITY-ST-ZIP		DESCRIP	4.4 CIT		7IP				- <u> </u>
TITLE		☐ DELETE	5.1 1/11		ļ			Change	Addition
NAME			5.2 NA						
STREET ADDRESS					DORESS				
CITY-ST-ZIP TITLE		DELFTE	5.4 CIT 6.1 TITL		ZIP			Change	Addition
NAME		L.J DELLE	6.1 HH 6.2 NAM					rmi Allande	L'1 Monito
STREET ADDRESS					DDRESS				
	· ·				·				
CITY - ST - ZIP	<u> </u>		6.4 CIT	1-51-	70°				

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 eath; 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 18 if 2) langed, or on an attachment with an accross.

CIGNIATUDE:

David L. Kra

April **28** , 1997 (407)390-1