

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

FILED

Apr 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000027984 (9)

1. Corporation Name

LEMON LAW SPECIALISTS, INC.



Principal Place of Business 918 PARK VILLA CIRCLE ORLANDO FL 32824	Mailing Address 918 PARK VILLA CIRCLE ORLANDO FL 32824-7536
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2. Principal Place of Business 21 3565 Cherryhill Dr. Suite, Apt. #, etc.		2a. Mailing Address 26 3565 Cherryhill Dr. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 03/25/1996	3a. Date of Last Report n/a
22 City & State 23 Orlando, FL		27 City & State 28 Orlando, FL		4. FEI Number 59-3373104	Applied For Not Applicable
24 Zip 32822		25 Country Orange		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29 Zip 32822		30 Country Orange		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent NEWMAN, LORI 918 PARK VILLA CIRCLE ORLANDO FL 32824				8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

10. Name and Address of New Registered Agent 81 Name Lori Newman 82 Street Address (P.O. Box Number is Not Acceptable) 3565 Cherryhill Dr. 83 84 City Orlando 85 Zip Code 32822	
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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: Lori Newman President DATE: 4/1/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT NEWMAN, LORI 918 PARK VILLA CIRCLE ORLANDO FL 32824	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PT Lori Newman 3565 Cherryhill Dr. Orlando FL 32822
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS WALKER, JAMES R 219 ALTAMONTE BAY CLUB CIRCLE, APT. 108 ALTEMONTE SPRINGS FL 32701	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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.

SIGNATURE: Lori Newman DATE: 4/1/97 DAYTIME PHONE: 407-875-4463

CR2E034 (9/96)