PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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

FILED Apr 07 1997 8:00am Secretary of State

| · | | | | | | | |
|-----|-------|---|-----|-----|------|-----|-----|
| DOC | UMENT | # | P96 | 300 | 0030 | 197 | (3) |

Country

9. Name and Address of Current Registered Agent

25

SOUTH LAKE ENTERPRISES, INC. Principal Place of Business Mailing Address 301 N. TUBB STREET 301 N. TUBB STREET OAKLAND FL 34760 OAKLAND FL 34760 3. Date Incorporated or Qualified 3a. Date of Last Report 04/08/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number 21 Suite, Apt. #, etc. 22

ity & State

\$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199 032, Orang E Yes No Florida Statutes 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)

Applied For

85

Zip Code

Not Applicable

VANDERLEY, JON 301 N. TUBB STREET OAKLAND FL 34760

City & State

23

24

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

Country

81 Name

82

В3 84 City

| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board or directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | |
|---|--|----------------------------|-----------------------------------|----------------------------|--|--|--|--|--|
| SIGNATURE | Shiratore, lyped or prittee name of reastered agent and tile 1 applicable. | | | | | | | | |
| 12. | | (NOT: Registered Agent sig | nature required when reinstating) | FICERS AND DIRECTORS IN 12 | | | | | |
| TIFLE | OFFICERS AND DIRECTORS DE DE | | ADDITIONS/CHANGES TO OF | Change Addition | | | | | |
| | - | • | <u> </u> | Change Addition | | | | | |
| NAME | VANDERLEY, JON | 1.2 NAME | | | | | | | |
| STREET ADORESS | 301 N. TUBB STREET | 1.3 STREET ADD | RESS | | | | | | |
| CHY-51-201 | OAKLAND FL 34760 | 1.4 CHTY - ST - ZIF | · | | | | | | |
| TITLE | ~17 | LETE 21 TITLE | DPS. | Change Addition | | | | | |
| NAME | VANDERLEY, JOSH VY | 2.2 NAME | VANder Ley, Ja | o\$h | | | | | |
| STREEL ADDRESS | 301 N. TUBB STREET | 2.3 STREET ADD | RESS and N. Tubh St | | | | | | |
| CITY - ST - ZIP | OAKLAND FL 34760 | 2.4 CITY~ST-ZI | Oakland 71 3 | 4760 | | | | | |
| TIFLE | - BPS' | LETE 3.1 TITLE | DVT | Change Addition | | | | | |
| NAME | VANDERLEY, JOEL OV' | 3,2 NAME | Vander Ley Noe | 4 | | | | | |
| STREET ADDRESS | 301 N. TUBB STREET " | 3.3 STREET ADD | TESS 301 N. TUBB ST | | | | | | |
| CITY+ST-ZIP | OAKLAND FL 34760 | 3.4. CITY-ST-ZI | · Oakland, 71 3 | 14760 | | | | | |
| TITLE | D DE | LETE 4,1 TITLE | | Change Addition | | | | | |
| NAME | VANDERLEY, KAY | 4. 2 NAME | | | | | | | |
| STHEET ACCURESS | 301 N. TUBB STREET | 4.3 STREET ADD | RESS | | | | | | |
| COV-ST-ZIP | OAKLAND FL 34760 | 4.4 City - St - Zif | | | | | | | |
| 1-11.5 | L) DE | | | Change Addition | | | | | |
| NAME | | 5.2 NAME | } | | | | | | |
| STREET ADDRESS | | 5.3 STREET ADD | RESS | | | | | | |
| C-TY - ST - ZIP | | 5.4 CHTY-ST-ZIA | n | | | | | | |
| THLE | L DE | LETE 6.1 TITLE | | Change Addition | | | | | |
| NAME | | 6.2 NAME | | | | | | | |
| STREET ADORESS | | 63 STREET ADD | ress (| | | | | | |
| CITY - S1 - 76° | | 6.4 CITY-ST-ZII | ,] | | | | | | |

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 efficer 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

SIGNATURE: