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

PROFIT CORPORATION ANNUAL REPORT

4007



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P96000031531 (2)

ORLANDO SITE DEVELOPMENT. INC.

Principal Place of Business Mailing Address 440 DEERWOOD AVENUE 440 DEERWOOD AVENUE ORLANDO FL 32825-8011 ORLANDO FL 32825 3. Date incorporated or Qualified 3a. Date of Last Report 04/05/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes Yes No 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name COOK, LAURIE A 440 DEERWOOD AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32825 83 84 City Zip Code 11. Pursuant to the provisions of Scci ons 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 (NOT). Registered Agent's gnature required when reinstating) Silguar no dysel flor priote a name of nigoricas disignor as distilled application DATE OF ICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE Addition TITLE 1.1 TITLE COOK, BRUCE A NAM: 1.2 NAME 440 DEERWOOD AVENUE 1.3 STREET ADDRESS STREET ADELESS. ORLANDO FL 32825 14 CITY-ST-ZIP CITY ST DELFTE Charige Addition 21 TITLE TIL.E NAME 2.2 NAME 23 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY 51 Addition DELETE 3.1 TITLE Change DITTE 3.2 NAME MALAE 3.3 STREET ADDRESS STREET ADDRESS CHY+51-2IP 3 4. CITY-S1-7/P DELETE Change Addition 4.1 THLE THE 4. 2 NAME NSM 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHTY - \$T - ZIP City St-7IP DELETE Change Addition 70116 5 t TITLE NAM. **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY (\$1 - Zet) 54 CITY - ST-ZIP DELETE Change Addition THEF 61 TITLE NAM 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS G.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 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 13 if changed, or on an attachment with an address.

SIGNATURE:

CITY - \$1 - 21F

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Jan 23 1997 8:00am

Secretary of State

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