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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

FILED Apr 21 1997 8:00am Secretary of State

DOCUMENT #

COUMENT # \$ 96000035609

GOLDEN YEARS CONSULTANTS

GYC N/C 02/21/97

			O	A				
		110	& RUSHM	ORE AU	E 3			
١.	LEHIGH ACRES FL						· · · · · · · · · · · · · · · · · · ·	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				33936		3. Date Incorporated or Qualified 3a. Date of Last Report		
2	Principal Place of Business		2a. Mailing Address			4. FEI Number	5/1/96	
21			26			105-6713915	Applied No. App	
Sulte, Apt. #, etc.			Suite, Apt. #. otc.			¢0.75		
22			27			5. Certificate of Status Desired	Fee Require	
City & State			City & State			6. Flection Campaign Financing \$5.00 May Be		
23			28			Trust Fund Contribution Added to Fees		
	Zip	Country Zip		Countr	Country 8. This corporation has liability for intangible tax under s. 199.032		032.	
24	25 29			30		Florida Statutes Yes No		
	9. Name and	Address of Current Ro	egistered Agent	81	T Name	10. Name and Address of New	Registered Agent	
	. 1			01	Name			
	VEDALAN C	2 SMIT	H	82	Street Add	dress (P.O. Box Number is Not Accep	itable)	
VERNON G SMITH 1108 RUSHMORE AVE 5				82	83			
				53				·
	LEHIGH ACK	RES FL	33921	B4	City		FL 85 Zip Code	
				ites the above	e-named cor	rporation submits this statement for th		stored
	office or registered agent, agent. I am femilianwith, ar	or both, in the State of F	ilorida. Such change was	s authorized b	v the corpora	alion's board of directors. Thereby ac	cept the appointment as regist	ered
2	· ^ / _	ad accept the obligation	18 (11, 300 (11) (007,000 (1))			SMITH	1/0/07	
SIC	SIGNATURE Signature, Typed or pair	ned name of registers is a Chara	of biller Lappricable (NC	TL Registeren Ag	ent signature requ	ured wher reinstating)	7/	
12		OFFICERS AND D		13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN	12 8
TITL	.E		[]] DELETE	1.1 TITLE	F	NESICENT	Change	Addition 8
NAN	AE .			3 S NVME	- 0	VERNONG SMIT	#	2
\$TR	EET ADDRESS			1.3 STREET	ADURESS	1108 KUSHMORE	1466 S	یّا
	Y-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————	1.4 CITY+:	ST-ZIP	Lettigh ACRES		ြည်
TITL	ŀ		L_I DELLIE	217016			Change [Addition C
NAM				2.2 NAMI				
	EET ADDRESS				ADDRESS			
TITL	(-ST-ZIP		DELETE	2.4 CITY - 3.1 TELL	SI · ZII'		Change	Addition
NAN			E.4 8444.16	3 2 NAME			E commisc E ;	tour.on
	EET ADDRESS				ADDRESS			
	Y-ST-ZIP			3.4. CiTY-				}
TITL			DETETE	43 11715			Change /	Addition
NAM	AE			4 2 NAME				
STR	EET ADDRESS			4.3 STREE	ADDRESS]
CITY	r-ST-7IP			4401Y-5	S1 - 20P			Ì
TITL	E		Driete	5.1 Talef			[order □]	Addition
NAN	AE			5.2 NAME			NL .1	2.60
STR	EET ADDRESS			5/3 \$TREET	ADORESS		W 41	21 <i>14</i> H
CITY	Y-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CHY-5	S1 - ZIP			
TITL	i i		DIAETE	6110119		Bertum Person Face of Passer Face of Nation 188	[] Change [] /	Addition
NAN	1			6.2 NAMi		5000021 -04/22/9701	:>Ubacib 849814	
	EET AODRESS			63 STREET		######################################	U4J~~U14	
CITY	r-ST-ZIP	en e		64 CHY 5	31 - ZDE	***165.00		

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), Fiduda 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 her 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 phanged, or on an attachment with an according.

I Smith VERNON & SMIT 11 4/9/97