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**PROFIT** CORPORATION. ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000041615 (1)

FLORIDA RETREAT, INC.

## FILED May 08 1997 8:00am Secretary of State



		44-14			<u> </u>	
Principal Place of Business		Mailing Address				*** ****
1250 \$ HWY 17-92, SUITE 110 LONGWOOD FL 32750		1250 S HWY 17-82, BUI LONGWOOD FL 32750-5	1250 S HWY 17-82, SUITE 110 LONGWOOD FL 32750-5712			
				3. Date Incorporated or Qualified 05/15/1996	3a. Date of Last	Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59 - 3386 586	h	Applied For
1   Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	<del></del>	CO 75 Addition		ot Applicat
Suite, Apr.	. F. Cic.	27		5. Certificate of Status Desired	7 .	Required
City & Sta	le	City & State		Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for i		s. 199.032,
	25	29	30		Yes No	
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Re	gistered Agent	
KE	LLEY, MICHAEL		81 Name			
125	50 S HWY 17-92, SUITE 110		B2 Street A	Address (P.O. Box Number is Not Acceptab	le)	
LO	NGWOOD FL 32750					<del></del>
			83			
			84 City		les Zir	Code
			84 City		FL 85 Zip	Code
				corporation submits this statement for the p poration's board of directors. I hereby accep		
SIGNATURE	Signature, typed or pratted name of registers	ed agent and title it applicable (N S AND DIRECTORS	Florida Statutes.  OTE: Registered Agent signature.  13.		DATÉ	PRS IN 12
IGNATURE 2.	Signature, typed or jik also name of registers  OFFICERS	ed agent and tille it applicable (N	OTE: Registered Agent signature	required when re-natating)	DATÉ	PRS IN 12
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Table the minimum supplies with this timing does not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes, 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 12 if changed, or on an attackment with an address.

**SIGNATURE:**