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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P96000042416 (3) **DOCUMENT #**

SKYDIVE PALATKA, INC.

DELAND FL 32720

Principal Place of Business	Mailing Address		
4015 REID ST 303 N. HIGH STREET BLDG K DELAND FL 32720 PALATKA FL 32177 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  OF (10/1900)	
2. Principal Place of Business	2a. Mailing Address	5	05/10/1996         Applied For           4. FEI Number         Applied For           59-3385197         Not Applicable
Suite. Apt. #, etc.	Suite, Apt. #, etc	С,	5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip   Country   25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 2 No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROUSE, MICHAEL H 303 N. HIGH STREET		81 Name	Address (P.O. Box Number is Not Acceptable)

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

83 84 City

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 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME ROUSE, MICHAEL H 1.2 NAME 303 N HIGH ST STREET ADDRESS 1.3 STREET ADDRESS DELAND FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE SUNDERLAND, EDWINA H NAME 2.2 NAME 303 N HIGH ST STREET ADDRESS 2.3 STREET ADDRESS DELAND FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE ☐ DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change \_\_\_ Addition TITLE NAME 5.2 NAME STREET ADDRESS 5,3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I 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.

dwina H. Sunderland 1/14/98 God) 738-9600

Zip Code

85

**FILED** 

Jan 26 1998 8:00am

Secretary of State