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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPÓRATIONS

DOCUMENT # P96000043369 (3)

APPLE VALLEY PROPERTIES, INC.

CITEL	ALLET THOI CITIES IN	o.						
Principal Place	e of Business	Mailing Addr	Mailing Address			186; 186; 448 18148 8441 8841; 8841; 884	4 60 014 616 60 546 04 146 0 61616	(18 ()))
D.B.A. SUNSCAPE APARTMENTS 13617 FLETCHER REGENCY DRIVE TAMPA FL 33613		13617 FLETCH	D.B.A. SUNSCAPE APARTMENTS 13617 FLETCHER REGENCY DRIVI TAMPA FL 33613-4235					
						3. Date incorporated or Qualified 05/21/1996	3a. Date of Last R	gport 7
···	lace of Business	2a. Mailing A	ddress	1		4. FEI Number	, Ar	oplied For
Sulte, Apt.	# oto	26 Suite, Ap	t # oto		·	59.3380877		ot Applicable
22		27	α. ν , υ ιο.	:		5. Certificate of Status Desired	50./5 / Fee Re	Additional equired
City & State	3	City & Sta	ale			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	
Zip	Country	7(p		_ Country ⊐		B. This corporation has liability for		. 199.032,
24	9. Name and Address of Cu	29	30	ــــــــــــــــــــــــــــــــــــــ		Florida Statutes 10. Name and Address of New Re	Yes LYNo	·
LOW	E, FREDERICK T ESQ.	Henri Hogistored Age		81	Name	10. Name and Address of New Ac	Bistoled Adell	
	HENDERSON BLVD.			82	64			
	E 605				Street Ad	Address (P.O. Box Number is Not Acceptable)		
	PA FL 33629							
				R4	City		85 Zip (Code
						orporation submits this statement for the	- FL	i
agent. I a	m familiar with, and accept the o	bligations of, Section (607.0505, Floric	la Statutei	S. '	ration's board of directors. I hereby acce	DATE	
12.		AND DIRECTORS	1 perior	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	PD RICE, WILLIAM E	L.] DELETE	1.1 11111			L Change	Addition
NAME STREET ADDRESS	% 3825 HENDERSON BLVD	SUITE 605		1.2 NAME 1.3 STREET	Annacee			
CITY-ST-ZIP	TAMPA FL 33629	. OOHL OO		1.3 SINCE !	1			l
TITLE	VSD		DELETE	21 11715			Change	Addition
NAME	DEBNAM, LEE			22 NAME	,			
STREET ADDRESS	% 3825 HENDERSON BLVD	. Suite 605		23 STREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL 33629		1	2 4 CITY-	ST-ZIP			
TITLE		L] DELETE	31 1111.6			L_] Change	Addition
NAME STREET ADDRESS				3.2 NAME	ADDDCCC			ĺ
CITY-ST-ZIP				3.3 \$TREE1 3.4 ICHY-1	- 1			ļ
TITLE			DELETE	4.1 TITLE	21.51		Change	Addition
NAME		-		4.2 NAME				
STREET ADDRESS				4.3 \$THEFT	ADDRESS			
CITY-ST-ZIP				4.4 ¢iTY-S	T- 7 IP			
TITLE		L	DELETE	5.1 TILE			Change	Addition
NAME			1	5.2 NAME				
STREET ADDRESS				5.3 \$TREET	l			
CITY-ST-ZIP			DECETE	5.4 CITY - S	T - ZII'		Change	Addition
TITLE NAME		L.	Journ	6.1 LITLE	1		∟ Онанус	LJ KOUIIU/I
STREET ADDRESS			•	6.2 NAME 6.3 \$1 KEE1	Anneree			
CITY-ST-ZIP				6.3 \$1KEE1	t t			ļ
14. I do heret	by certify that the information sup	plied with this filing do	oes not qualify f	or the exe	mption sta	ted in Section 119.07(3)(i), Florida Statute	es. I further certify that	the
Informatio I am an of	n indicated on this annual report	or supplemental annual or the receiver or true	ial report is true ustee empowere	and accu d to exec	rate and t	hat my signature shalf have the same lega port as required by Chapter 607, Florida i	al effect as if made un	der oath; that