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**PROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000044969

1. Corporation Name

ST. GEORGE OF SANFORD, INC.

Principal Place of Business

**301 S. FRENCH AVENUE
SANFORD FL 32771**

Mailing Address

**301 S. FRENCH AVENUE
SANFORD FL 32771**

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

29 **30**

9. Name and Address of Current Registered Agent

**AYOUB, FOUAD
301 S. FRENCH AVENUE
SANFORD FL 32771**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL **85** Zip Code

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 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 consolidating)

DATE

12. OFFICERS AND DIRECTORS

11 TITLE **D** [] DELETE

NAME **AYOUB, FOUAD S**
STREET ADDRESS **10207 STONEBROOK DRIVE**
CITY-ST-ZIP **SANFORD FL 32771**
12 TITLE **D** [] DELETE

NAME **MANSOUR, EMAD A**
STREET ADDRESS **3610 JONQUIL LANE**
CITY-ST-ZIP **WINTER PARK FL 32792**
13 TITLE [] DELETE

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32 TITLE [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] Change [] Addition

12 NAME [] Change [] Addition

13 STREET ADDRESS [] Change [] Addition

14 CITY-ST-ZIP [] Change [] Addition

15 TITLE [] Change [] Addition

16 NAME [] Change [] Addition

17 STREET ADDRESS [] Change [] Addition

18 CITY-ST-ZIP [] Change [] Addition

19 TITLE [] Change [] Addition

20 NAME [] Change [] Addition

21 STREET ADDRESS [] Change [] Addition

22 CITY-ST-ZIP [] Change [] Addition

23 TITLE [] Change [] Addition

24 NAME [] Change [] Addition

25 STREET ADDRESS [] Change [] Addition

26 CITY-ST-ZIP [] Change [] Addition

27 TITLE [] Change [] Addition

28 NAME [] Change [] Addition

29 STREET ADDRESS [] Change [] Addition

30 CITY-ST-ZIP [] Change [] Addition

31 TITLE [] Change [] Addition

32 NAME [] Change [] Addition

33 STREET ADDRESS [] Change [] Addition

34 CITY-ST-ZIP [] Change [] Addition

35 TITLE [] Change [] Addition

36 NAME [] Change [] Addition

37 STREET ADDRESS [] Change [] Addition

38 CITY-ST-ZIP [] Change [] Addition

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, with all other like empowered

SIGNATURE:

Fouad S AYOUB Pres

4/26/99

(407) 323-8502

CR2E034 (11/98)