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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000047407 (7)

KOLEAN PROPERTIES, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

2a. Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4412 COMMERCIAL WAY SPRING HILL FL 34606

SIGNATURE:

4412 COMMERCIAL WAY SPRING HILL FL 34806-1866

FILED Apr 11 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

0443034

3. Date Incorporated or Qualified

06/04/1996

4. FEI Number

21 45X0 L	are in the woods t	1 26 4320 Lake	IN THE	· Woods	5 Dr 34-3381274	Not Applic	cable
Suite, Apt. (22)	#, etc	Suite, Apt. #, etc.				\$8.75 Addition Fee Required	
City & State 23 ביין מ	. 111.77 #-1	City & State 28 Spring Hi	II FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zif	Country		8. This corporation has liability for inta		
24 3460	7 25	29 34607	30		Florida Statutes		Je,
	g. Name and Address of Curren		1		10, Name and Address of New Regis		
NES	SLER, PAUL H JR	······································	81	Name			
4052 COMMERCIAL WAY SPRING HILL FL 34606				82 Street Address (P.O. Box Number is Not Acceptable)			
				82 Street Address (P.O. Box Number is Not Acceptable) 83			
,	•		64	City		FL 85 Zip Code	
					progration submits this statement for the purp		
	egistered agent, or both, in the State in familiar with, and accept the <mark>oblig</mark> a				ration's board of directors. I hereby accept the	ne appointment as register	ned.
SIGNATURE	your a contract to a second or our framework concentry an expense of con-						
	Signature, typed or profest came of regulared ago			eni signature rec	.	DATE	
12.	OFFICERS ANI	DELETE	13.		ADDITIONS/CHANGES TO OFFICER	Change Ad	
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NAME	KOLEAN, DENNIS E		1.2 NAME		مأدا فطلانيا وياما وينا	ade Dallie	
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CITA- 21 - Vis.	SPRING HILL FL 34606	1 55,575	1.4 CITY - 9	T-ZIP	320 Lake in the Wo Spring Hill FL 346	07	
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าเสเซ		☐ DELETE	4.1 TITLE			[] Change [] Ad	ddition
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NAM:			6.2 NAME	J			
STREET ADDRESS			6.3 STREET	ADDRESS			
CHY-ST ZIP			6.4 CITY - S				
14. I do hereb	y certify that the information supplied	d with this filing does not qualify	for the exe	mption state	ed in Section 119.07(3)(i), Florida Statutes. I	further certify that the	
Lam an of	ficer or director of the corporation or	the receiver or trustee empowe	red to exec	urate and the oute this rep	at my signature shall have the same legal e ort as required by Chapter 607, Florida Stat	fect as if made under oath utes; and that my name	h; that
appeasir	i Block 12 or Block 13 it stranged, or	On an altachment with #9 9000	008 .				