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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

396-4883

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000059589 (7)

CENTRAL FLORIDA REALTY AND INVESTMENTS OF ORLAND O, INC.

O, INC.							
Principal Place of Business Mailing Address					- I HOODING OF THE LEXICO CANADA SOUTH CONTROL CO.	it daint Bilin (mid) gild)	I BESED HER SER!
2987 VINELAND RD 2967 VINELAND RD					DO NOT WRITE IN THIS SPACE		
KISSIMMEE F US	FL 34746	KISSIMMEE FL 34746 US					
		00			3. Date Incorporated or Qualified		
					07/17/1996		
	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.			59-3432924		Not Applicable
					5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution		Added to Fees	
Zip Country		Zιp	L		8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June		□ No
	g. Name and Address of Curre	nt Registered Agent		1	10. Name and Address of New Re	gistered Agent	
	GEAJIS, TIMOTHY		81	Name			
2967 VINELAND RD			62	Street Add	ddress (P.O. Box Number is Not Acceptable)		
KIS	SSIMMEE FL 34748		83	 			
			55				
			84	City		FL 85 Z	ip Code
office or i agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ag				rporation submits this statement for the p ation's board of directors. I hereby accep	of the appointment	as regi
12.		D DIRECTORS	13.	en eignature rech	ADDITIONS/CHANGES TO OFFIC		ORS I.
TITLE	P	DELETE	1.1 TITLE		1100	☐ Chang	je 🔲
NAME	BOGEAJIS, TIMOTHY		1.2 NAME				
STREET ADDRESS	2967 VINELAND RD		1.3 STREET	ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		1.4 CITY - S	ST-ZIP			
TITLE	VP	☐ DELETE	2.1 TITLE			Chang	ye □ A
NAME	MCCREERY, BEVERLY A		2.2 NAME				
STREET ADDRESS	2967 VINELAND RD		2.3 STREET	ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		2 4 CITY-	ST-ZIP	·		
TITLE	ST	☐ DELETE	3.1 TITLE			☐ Chang	ge 🔲 Addi
NAME	HAYHURST, BEULAH		3.2 NAME				
STREET ADDRESS	2967 VINELAND RD		3.3 STREET				
CITY-ST-ZIP TITLE	KISSIMMEE FL	T DELETE	3.4. CITY-1	ST-ZIP		Chang	18 4
NAME		C VCC.	4. 2 NAME			L., Ortally	
STREET ADDRESS	•		4.3 STREET	ADDRESS			
CITY-ST-ZIP							
TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Chang	je la die
NAME		_	5.2 NAME				
STREET ADORESS			5 3 STREET	ADDRESS			ï
CITY-ST-ZIP			5.4 CITY-S				
TITLE		DELETE	6.1 TITLE			☐ Chang	e Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
			.				

14. Thereby 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 chapped, or on an appearment with an address.