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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 31 1997 8:00am Secretary of State

DOCUMENT # 1. Corporation Name	P96000072501	(5)
I A S. EARMING LIST B	NIAA IIIA	

CONNELL SOL 38549 U.S. HIC	L.A.D. FAMILY HOLDINGS, INC.  rincipal Place of Business  ONNELL SQUARE 1549 U.S. HIGHWAY 19 N. ALM HARBOR FL 34684		Mailing Address  CONNELL SOUARE 38549 U.S. HIGHWAY 19 N. PALM HARBOR FL 34684-1033						
						3. Date Incorporated or Qualified 08/30/1996	3a. Da	ate of Las	l Report
2. Principal F	Place of Business	2a. Mailir	ng Address			4. FEI Number			Applied For
21	#	26				59-3404791	<del></del>		Not Applicat
Suite, Apt. 22	. #, etc.	27	, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Star	te.	City &	ß State			6. Election Campaign Financing			May Be
23		28		·····	<del> </del>	Trust Fund Contribution			d to Fees
Zip [7]	Country	Zip		Count	ry	8. This corporation has liability for			rs. 199.032,
24	25 9. Name and Address of C	29	Agent	30		Florida Statutes L.  10. Name and Address of New Re	Yes [		
GIII	ITH, KAREN R	direit Hegistered	Agoin	8	1 Name	10, tealing and recorded of their five	y diameter	- Agoin	
	W. KENNEDY BLVD			ي ا					
	TE 745			a	Street Add	tress (P.O. Box Number is Not Acceptal	ole)		
	MPA FL 33609			6	3				
				-	4 00			121 7	- 2-1-
				18	4 City		FL	85 Z	ip Code
office of	registered agent or both, in the am familiar with, and accept the	State of Florida, Su	ch change was	suthorized	by the corpora	rporation submits this statement for the pation's board of directors. Thereby acce	pt the app	ointment	as registered
agenr 1 a SIGNATURE									
SIGNATURE	Signature, typed or printed name of register	red agent and tele if applic	able (NO	ITE Registered A		uired when reinslating)	DATE		
SIGNATURE	5-gradum typed or probled name of implies OFFICER		abie (NO	TE Registered A	Agent signature requ		DATE		ORS IN 12
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