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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name P96000077553 (1)

DOYLE VENTURES, INC.

Principal Place of Business

Mailing Address

1000 GOLESIDE DRIVE

FILED May 01 1998 8:00am Secretary of State



A-1		WINTER PARK FL 32782								
WINTER PARK FL 32792					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
US					· ·	or Qualified				
2. Principal P	lace of Business	2a. Mailing Address			09/18/1996 4. FEI Number			Applied F	Enr.	
21 1060		26 1000 GO	LECT	ve De		59-340	147 <i>59</i>	Not Appl		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<u> </u>			60	75 Addition		
22	27			5. Certificate of Status	5. Certificate of Status Desired Fee Required					
City & State		City & State		r,	6. Election Campaign	· ·		.00 May 8		
	sburg 1-L.	28 WINTER PAR		r	Trust Fund Contribu	· · · · · · · · · · · · · · · · · · ·		ded to Fees		
24 Zip 34	L788 25 LAKE	و دور چې څه ا	Countr	ANGE	8. This corporation ow				9	
24	9. Name and Address of Current	1-0	10 00	HNGE	Personal Property T 10. Name and Address			№ No		
DO	/LE, DONALD A JR		81	Name	IQ. Hallo alla Hadioo		noice rigoin			
	O GOLFSIDE DRIVE		_							
WINTER PARK FL 32792				82 Street Address (P.O. Box Number is Not Acceptable)						
*****	TON THE TE OF OF		83		<u>'</u>					
			84	City			Tot	Zin Codo		
			84	City			FL 85	Zip Code		
11, Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes	the abov	e-named co	rporation submits this staten	nent for the purp	pose of chang	ing its regis	tered	
agent. La	egi stere d agent, or both, in the state t m <mark>familiar with, and accept the obliga</mark> :	or Florida: Such change was au tions of, Section 607.05 <mark>05,</mark> Flori	da Statute	y the corpora s.	ation's board of directors, i r	nereby accept t	ne appointmei	nt as registe	жеа	
SIGNATURE										
	Stonature, typed or printed name of registered agen			ent signature req	u-red when re-installing)		DATE		E	
12.	OFFICERS AND	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGE	ES TO OFFICER	RS AND DIREC		odition \$	
NAME	DOYLE, DONALD A SR.	LI OLLETE	1.2 NAME					ingo LIA	Janion 3	
STREET ADDRESS	1000 GOLFSIDE DRIVE		•	T ADDRESS					8	
CITY-ST-ZIP	WINTER PARK FL 32792		1.4 CITY-1						Ş	
TITLE	0	DELETE	2.1 TITLE	<u> </u>			☐ Chi	ange 🔲 A	ddilion 2	
NAME	DOYLE, DONALD A JR		2.2 NAME							
STREET ADDRESS	1000 GOLFSIDE DRIVE		2.3 STREE	T ADDRESS					•	
CITY-ST-ZIP	WINTER PARK FL 32792		2. 4 CITY-	ST-ZIP						
TITLE		☐ DELETÊ	3.1 TITLE			•	☐ Cha	ange 🔲 A	ddition	
NAME			3.2 NAME							
STREET ADDRESS			1	I ADDRESS						
CITY-ST-ZIP		DELETE	3.4. CITY -	ST-ZIP			——————————————————————————————————————		delition	
TITLE NAME		C DETEIS	4.1 TITLE 4. 2 NAME				Cha	A 🔲 agir.	ddition	
STREET ADDRESS				T ADDRESS						
CITY-ST-ZIP			4.5 SINEE							
TITLE		DELETE	5.1 TITLE	31-21			Cha	ange A	ddition	
NAME			5.2 NAME							
STREET ADDRESS				ADDRESS						
CITY-ST-ZIP			5.4 CITY-5							
TITLE		☐ DELETE	6.1 TITLE				Cha	ange A	ddition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP			6.4 CITY- S	ST - ZIP						

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 frustee 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 affairment with a architess.