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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000082298 (6)

BOGGY CREEK KISSIMMEE, INC.

407 IDYLWYLD DRIVE 407 IDYLWYLD DRIVE FT. LAUDERDALE FL 33301-2730 FT. LAUDERDALE FL 33301 3. Date Incorporated or Qualified 3a. Date of Last Report 10/04/1996 2. Principal Place of Business 2a. Mailing Address FM Number Applied For 407 IDLEWYLD DRIVE o5-0*70* 26 407 IDLEWYLD DRIVE Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Ζıρ Country This corporation has liability for Intangible tax under s. 199.032, Florida Statutes Yes \(\infty\) No 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 STURGIS, GREGORY C 407 IDYLWYLD DRIVE Street Address (P.O. Box Number is Not Acceptable) 62 FT. LAUDERDALE FL 33301 407 IDLEWYLD DRIVE 83 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent algorithms required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 96/6) DELETE X Change Addition 1.1 TITLE S/D Title STURGIS, GREGORY C NAME 1.2 NAME 407 IDYLWYLD DRIVE STREET ADDRESS 1.3 STREET ADDRESS 407 IDLEWYLD DRIVE FT. LAUDERDALE FL 33301 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change X Addition 2.1 TITLE TITLE P/D 2.2 NAME HUBER, DON 2.3 STREET ADDRESS STREET ADORESS 904 MAIN ST. WINDERMERE, FL 34786 2. 4 CITY-ST-ZIP CHTY-ST-ZIF DELETE Change Addition TIFLE 3.1 TITLE NAME 3.2 NAME DEJOHN, GREGORY 3.3 STREET ADDRESS 4675 RAVENSWOOD RD. STREET ADDRESS FORT LAUDERDALE, FL 33312 3.4. CITY - ST- ZIP CITY-ST-2H K Addition DELETE 4.1 TITLE Change THE 1. 2 NAME NAME BRAUSER, MICHAEL STREET ADDRESS 4.3 STREET ADDRESS 3700 NE 27 AVE. LICHTHOUSE POINT, FL 33069 CHTY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition □ DELETE 5.1 TITLE THLE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIF 54 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TATLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do 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 if 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRECORY STURGIS