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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

FILED Jun 16 1997 8:00am Secretary of State

DOCUMENT #	P96000088408	(5) changely 3 96
	SCIONAL PARKI INC.	(22/1
Citrus	Invest?	'calty, Inc.
Principal Place of Business	Malling Address	

Ci	trus Invest	Reo Reo	My Inc.		
Principal Place		Malling Address			
3140 MASTERS CLEARWATER I	DRIVE	3140 MASTERS DRIVE CLEARWATER FL 34821-	1816	·	
				3. Date Incorporated or Qualified 3a. 10/25/1996	Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		57-5411213	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		City P. Ctoto			Fee Required
City & State	•	City & State	_	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangi	····
24 ~	25	29	30		No
[24]	g, Name and Address of Current		100	10. Name and Address of New Registers	
EE1 (DMAN, DONNA J ESQ.	-	81 Namo		
	, ZONOBER, BARNES, ZIMMET &	LUNICE	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	MCCORMICK DRIVE	· Orwon	62 Stieet Add	iless (P.O. Box Number is Not Acceptable)	
	ARWATER FL 34619		83		
			04 04		B5 Zip Code
			84 City	F	L B5 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	utes, the above-named corp	poration submits this statement for the purpos	of changing its registered
office or ri	egi ste red agent, or both, in the State i m fam iliar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	s authorized by the corpora Florida Statutes.	tion's board of directors. I hereby accept the a	appointment as registered
SIGNATURE					
SIGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NC	OTE: Registered Agent signature requi		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D CLASSISS	☐ DELETE	1.1 TITLE		Change Addition
NAME	RUTENBERG, CHARLES		1.2 NAME		
STREET ADDRESS	3140 MASTERS DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34621	PASCELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE	D MEDDINGER OFFIEN	FERTERE	2.1 TITLE		Change C Apollion
NAME	MERDINGER, STEVEN		2.2 NAME		
STREET ADDRESS	888 7TH AVENUE, SUITE 2900 NEW YORK NY 10106		2 3 STREET ADDRESS		
CITY-ST-ZIP	MEN TONK NT TO TOO	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
TITLE NAME		Ottell	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
1			3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CI1Y - S1 - ZIP		/
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	A	# 1/11/m
STREET ADDRESS			5.3 STREET ADDRESS		1011419"2
CITY-ST-ZIP			5.4 CITY - ST - ZIP		1 71
TITLE		☐ DELETE	6.1 THLE	400002215	Addition
NAME			6.2 NAME	400002215: -06/18/9?01002-	-nn7 •
STREET ADDRESS			6.3 STREET ADDRESS	***165.00	Number 8
City-ST-ZiP			6.4 CITY-ST-ZIP	recreases to the second the field had	

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 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 inchanged, or on an attachment with amaddress.