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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State

1997

**DIVISION OF CORPORATIONS** 

	CHRISTIES	Hnteques and	y Conecavic	<b>'</b>	
Princ pal Plac	ce of Business	Mailing Address	v. 111 th Way Ue, Ha 3260,	,	
P.O.	nopy, 76.32667	304 1010	11 41 -		
Muca	mary 76 32661	Cyainesvil	le, 44 3260	7	
<i>Ji jica</i>		•	,	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal F	race of Business P. J. 1302 129	2a. Mailing Address	100 504 N.W	4. FEI Number	Applied For
21 MICL	anopy, 76 32667	26 RO BOY	129 111 MW	y 59-3422090	Not Applicable
Suite Apt	N. etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	City & State	, 7,	6. Election Campaign Financing	\$5.00 May Be
23 18/1/0	<i>L</i> ,	28 GAINESVILLY	c+1	Trust Fund Contribution	Added to Fees
Zip	Country	Zip 30607	Country	8. This corporation has liability for	
24 3266	7 25 Alachua	29	30 Alachua		J Yes Z No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Re	glatered Agent
Alica	bolas Schweeder			DARBARA COLLINS	
# W 4 4 4	holas Schweder O.D Newber Lines Ville, 7	ry Kel	82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
401		1 DARAT	83	mu m m	
Ta	unesville, +1	1 3000	84 City		85 Zip Code
			90	unesville	FL   3200'/
11. Pursuar t	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statut of Florida, Such change was a	les, the above-named co authorized by the corpor	rporation submits this statement for the pation's board of directors. I hereby accep	ourpose of changing its registered of the appointment as registered
agent. La	an familiar with, and accept the obliga	lions of, Section 607.0505, Fl	orida Statutes.		// 000
SIGNATURE		and tille if applicable (NOT	Ur Presio		7-20-9 1
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
*( <b>I</b> L)	President 1011:	DELETE	1.1 TITLE		Change Addition
NAME	Barbara W. Collins		1.2 NAME		
STREET ATIORESS	KAU Nal 11.	32607	1.3 STREFT ADDRESS		
CITY S1.72	Garnesville, 7/4	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
DT:F	Vice President	)C	2.2 NAME		L Change L Addition
CEDIEL FUUDICC	Christie A. Colule Soy NW 1114 Way	,)	2.3 STREET ADDRESS		
CRY SI-ZIE	Gainesville, 71, 320	607	2.4 CITY-ST-ZIP	·	
T TLF		DELETE	3 1 TITLE		Change Addition
<b>YAM</b> t			3 2 NAME		,
STREET ADDRESS			3 3 STREET ADDRESS		
CHEY-ST ZIP		T briets	34 CITY-ST-ZIP		Ohane Tales
THEF		L) DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME Street adoress			4 2 NAME 4 3 STREET ADDRESS		
Offy - SY - Ziff			4.4 City-St-ZiP		
DELE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		( ) An
STREET ADDRESS			5.3 STREET ADDRESS		( 9)/s
C41Y - \$1 70P			5.4 CITY - S1 - ZIP	······································	~00/,
1046		DELETE	6.1 TITLE	المعادر الله المعادر المعادر المعادر المعادر المعادر المعادر المعادر المعادر المعادر	Change Addition
NAME CHOICE ABOVE AND			6.2 NAME	30000218 -05/23/970100	3213  011
STREET ADGRESS:	l .		6.3 STREET ADDRESS	でいうことがくがく でかり 月 日	[5] [ [5] [ [6] [ 6] [ 6] [ 6] [ 6] [ 6]

14. Ido 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 if changed, or on an attachment with an address