SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATIS

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000089617 (0)

STORIES OF OLDE, INC.

Pg-10/2

FILED 97 AUG 11 AM 8: 24

SECALIZATE OF STATE TALLAMÁSSEE, FLORIDA



Principal Place of Business Mailing Address						3 INSTITUTE LEGIS DIELE DANS ENTER DE	(1) 00 301 FB(ija jajia ailāj (i		
P O BOX 2996 RIVERVIEW FL 33568		P O BOX 2996 RIVERVIEW FL 33568								
						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified	3a. Da	ate of Last R	eport	
						10/29/1996				
–	lace of Business	2a. Mailing Address				4. FEI Number			plied For	
21		26				59-3407006	·		t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75			
City & State		City P. Ciata			ļ		Fee Re			
· ·		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country		Zip Country				Trust Fund Contribution				
25		29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
	9. Name and Address of Current		1901			10. Name and Address of New Re			1140	
IA	WTHER, LESLIE M		8	1	Name					
100	325 FOXCREST WAY		<u> </u>	1		- W - 49.0 B - W				
	ERVIEW FL 33569		8.	2	Street Addre	ddress (P.O. Box Number is Not Acceptable)				
****			8	3						
			8	4	City			85 Zip (Code	
					•		FL	, '		
agent. I ar	io the provisions of Sections 607.0502 egistered agent, or both, in the State in mitamiliar with, and accept the obliga	and 607.1508, Florida Statu of Florida. Such change was lions of, Section 607.0505, Fl	tes, the abo authorized b lorida Statut	by es.	 named corporation 	oration submits this statement for the p on's board of directors. I hereby accep	arpose of t the app	changing it ointment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (NO)	1£: flegistered A	gen	n signaturo require	d when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	IS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	-				☐ Change	Addition	
NAME	Lawther, Leslie M		1.2 NAM6	Ε		6000022 -08/15/9 ****169	686	376 -	4	
STREET ADDRESS	10625 FOXCREST WAY	1.3 S		1.3 STREET ADDRESS		-08/15 <u>/</u> 9	701	:0890	10	
CITY-ST-ZIP	RIVERVIEW FL 33569		1.4 CITY - ST - ZIP		- ZIP	****165	.00		5.00	
TITLE	-	☐ DELETE	2.1 TITLE					Change	Addition	
NAME			2.2 NAME	E						
STREET ADDRESS			2.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP			2. 4 CITY	- \$1	i - ZIP					
TITLE 7		☐ DELETE	3.1 TITLE					Change	☐ Addition	
NAME #			3.2 NAME	E						
STREET DODRESS			3.3 STRE	E1 A	ADDRESS					
CITY-ST-ZIP			3.4. GITY	- \$1	J-ZIP					
TITLE		L. DELETE	4.1 TITLE					☐ Change	Addition	
NAME			4. 2 NAM	E						
STREET ADDRESS			4.3 STREI	ET A	ADDRESS					
CITY-ST-ZIP	-		4.4 CiTY-	SI	- ZIP					
TITLE		☐ DELETE	5.1 TITLE					☐ Change	☐ Addition	
NAME			5 2 NAME	E						
STREET ADDRESS			5 3 STREE	ET A	NDDRESS					
CITY-ST-ZIP	·	- ··· · · · · · · · · · · · · · · · · ·	5.4 CITY-	· ST	- ZIP			$\angle A$		
TITLE		☐ DELETE	6.1 TITLE		l		1	Champe	Addition	
NAME			6.2 NAME	Ξ			<i>Y</i>	$\mathcal{L}\mathcal{U}$		
STREET ADDRESS			6.3 STREE	et A	ADDRESS	•		~~~~		
CITY-ST-ZIP			6 A CITY	ст	. 7iD		()	y \	ĺ	

14. I do hereby certify that the information supplied with this filing does not qualify for the excemption 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.

pg.2012



July 22, 1997

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

To whom it may concern:

As we explained to Amy Allen of your office, we did not receive a "1st Notice" of the 1997 Annual Report packet. Our company was formed in October of 1996, and we did not realize that we would have to renew again as early as January 1997, otherwise we would have followed up as to where this packet was.

It is our understanding that this letter, as well as our check in the amount of \$165.00 will suffice in keeping our company active within the regulations of your office.

Thank you in advance for your help in this regard.

Sincerely,

Stories of Olde, Inc.