

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

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PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000097395 (3)**

1. Corporation Name

ELM CREEK EMUS INC.

FILED

98 JUL 21 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

20907 BOWMAN ROAD
BROOKSVILLE FL 34610

Mailing Address

20907 BOWMAN ROAD
BROOKSVILLE FL 34610

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1996

4. FEI Number

65-0717645

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 **13427 VERNON DAIRY RD**

Suite, Apt. #, etc.

2a. Mailing Address

26 **P.O. Box 345**

Suite, Apt. #, etc.

City & State

23 **BROOKSVILLE, FL**

Zip

24 **34610**

Country

25 **USA**

City & State

28 **LAND O LAKES, FL**

Zip

29 **34639**

Country

30 **USA**

9. Name and Address of Current Registered Agent

ROBERTSON, DAVID J
20907 BOWMAN ROAD
BROOKSVILLE FL 34610

10. Name and Address of New Registered Agent

81 Name

ROBERTSON, DAVID J.

82 Street Address (P.O. Box Number is Not Acceptable)

13427 VERNON DAIRY RD

83

84 City

BROOKSVILLE

FL

85 Zip Code
34610

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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE



DAVID J. ROBERTSON, President

4/20/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PT**
STREET ADDRESS **ROBERTSON, DAVID J**
CITY-ST-ZIP **20907 BOWMAN ROAD**
BROOKSVILLE FL 34610

TITLE ☐ DELETE

NAME **VS**
STREET ADDRESS **ROBERTSON, ROXANNE M**
CITY-ST-ZIP **20907 BOWMAN ROAD**
BROOKSVILLE FL 34610

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

13427 VERNON DAIRY RD.

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

13427 VERNON DAIRY RD.

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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-07/24/98-D1078-008

******150.00 ****150.00**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

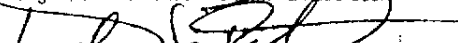
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:



11/20/98

R12-995-1117

CR2E034 (10/97)