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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700001323 (9)

SPECTRUM OF ORLANDO, INC.

FILED Mar 05 1998 8:00am Secretary of State



	<u></u>			
Principal Place of Business	Mailing Address		, , , , , , , , , , , , , , , , , , , ,	i aniai iidan iiiik linka (ili ikal
301 NOBIDI FERNCREEK AVENUE	301 NORTH FERNOREEK	AVENUE		
ORLANDO FL-32803 ORLANDO FL-32803		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified	
			01/07/1997	
2. Principal Place of Business	2a. Mailing Address	T-121-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	4. FEI Number	Applied For
21 Has Curry Ford Rd		sworth Ct	59.3417246	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State	-	6. Election Campaign Financing	\$5.00 May Be
23 Orlando, FL Zip Country	28 Drilando Zip	Country	Trust Fund Contribution	Added to Fees
24 32822 25 USA	— `	30 USA	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
9. Name and Address of Currer			10. Name and Address of New Registers	
Name				
ANA STATES PERSONNELL ALPERTE			aren D. Crouse	
ORLANDO FL 32803	•	82 Street Addi	ress (P.O. Box Number is Not Acceptable)	→
1.0.1.00		83	3 1011150001111	
	_			
	\sim	B4 City	ando F	85 Zip Code
11. Pursuant to the provisions of Sections 607.050	and 607,1508, Florida Statute:	s, the above-named corp	poration submits this statement for the purpose	e of changing its registered
Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the original of the section of	of Florida. Such charge was at Althors of, Section 607/0505, Flor	uthorized by the corporation	ion's board of directors. I hereby accept the a	appointment as registered
SIGNATURE		\mathcal{U}	3-2	1-98
Signature, typed or printed name of regulators ago		Registered Agent signature requir		
	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	DEVETE	1.1 TITLE		Change Addition
NAME CROUSE, KAREN D/ STREET ADDRESS 7803 FARNSWORTH COURT	,	1.2 NAME		
ORI ANDO EL ADAGE		1.3 STREET ADDRESS		ļį
CITY-ST-ZIP URLANDO FL 32825	DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME	[] DECEME	2.1 TITLE		Change
STREET ADDRESS		2.2 NAME		·
CITY-ST-ZIP		2.3 STREET ADDRESS	· · ·	
TITLE	DELETE	2. 4 CITY+ST-ZIP 3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		,
STREET ADDRESS		4.3 STREET ADDRESS		İ
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELET É	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		j
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. I hereby certify that the information supplied wi	th 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 supplied with this filing boes not quality 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 true exemptions that is report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attacher of the corporation of the receiver of the corporation of the corporation of the receiver of the receiver of the corporation of the receiver of the corporation of the receiver of