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

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 22 1998 8:00am

ANNL	PORATION JAL REPORT 1998			andra B. Mo Secretary of S ON OF CORP	State	Secretary of State
DOCUI 1, Corporation RAY CO	1101111111	P97000	002571	(2)		
Principal Place 303 JUNIPER LADY LAKE F	CIR		Mailing Address 303 JUNIPER CH LADY LAKE FL (	R		DO NOT WRITE IN THIS SPACE
• Principal D	lace of Business		2a, Mailing Addre			3. Date Incorporated or Qualified 01/06/1997 4. FEI Number Applied For
21 Philopai Fi	ace or ensuress		28. Walling Addit	835		4. FEI Number Applied For Not Applicable
Suite, Apt.	#. etc.		Suite, Apt. #,	otc.		5. Certificate of Status Desired See Regulred Fee Regulred
City & State	,		City & State		·	Election Campaign Financing \$5.00 May Be
23	<del></del>		28	<del></del>		Trust Fund Contribution Added to Fees
Zip 24	25	ountry	Ζφ <b>29</b>	30	nuntry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ ♣6
24		ddress of Current F	4	130	<b>i</b>	10. Name and Address of New Registered Agent
303	NLEY, RAY I JUNIPER CIR DY LAKE FL 3215	<b>39</b>			81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable)
		•			84 City	FL 85 Zip Code
office or re	edistated accent, or	Sections 607.0502 a both, in the State of accept the obligation	Florida, Such chan	oe was author	i <b>⊞</b> d by the coroora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed	Figure of regel and Arjent a		(N/11f : Regis	l Agent signature requ	ured when reinstaling) DATE
TITLE PARKE NAME STREET ADDRESS	RAY CO.	OFFICERS AND E WIFY FRE CIR FI 32/59	DE	LETE 1	LE ME REFT ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE NAME STREET ADDRESS	2017 10/18	1.1 2019	□ DE	2	2 ME 3 EET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS			DE	3	.4 Y-SI-ZIP  1 i E  2 N	- Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS			Dέ	LETE 4	1 TO 2 NA 1E 3 STR E1 ADDRESS	☐ Change ☐ Add <b>illon</b>
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			L.) DE	LETE 5 5	4 CITTL ST-ZIP 1 THE 2 NAM 3 STREET ADDRESS 4 CHY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DE	LETE 6 6	1 TITLE 2 NAME 3 STREET ADDRESS 4 CHY-ST-ZIP	☐ Change ☐ Addition

14. Hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(9)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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.