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

FILED Mar 30 1998 8:00am Secretary of State

DOCUMENT # P9700004795 (5) ELY & MOHRE DEVELOPMENT, INC.											
Principal Plac		Mailing A	Mailing Address					4011: 00111 BIOII F	10 WIN	1411 I J ()	
1010 FOREST	T CIRCLE INGS FL 32708	1010 FOREST CIRCLE WINTER SPRINGS FL 32708					•				
J. Activitizat On the	INGO TC VETOO	******	OF THEOD IC OF	100			DO NOT WRITE II	N THIS SPACE			_
							3. Date Incorporated or Qualified				1
2. Principal P	lace of Business	2a. Mailin	2a. Mailing Address				01/01/1997 4. FEI Number Applied F			ed For	1
21		26	+				59-3421602		Not Applicable		
Suite, Apt.	#, etc.	} 	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Add se Requi		
City & State	e		City & State				6. Election Campaign Financing		<u>-</u> -		+
23		28	}				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip	 				8. This corporation owes or has paid		`	~]
24	25 9. Name and Address of Current	29 t Registered A	gent	30			Personal Property Tax due June 3 10. Name and Address of New Regi		<u> </u>	NO	-
EL.	Y, MICHAEL			8	1 Name						1
1010 FOREST CIRCLE				8	2 Street	Addre	ss (P.O. Box Number is Not Acceptable	*)			┨
WINTER SPRINGS FL 32708				8	<u>-</u>		<u> </u>				4
ļ				В-	4 City			FL 85	Zip Cod	de	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508	3, Florida Statut	es, the abo	ve-named	corpo	ration submits this statement for the purify board of directors. I hereby accept		ing its re	egistered	1
agent. La	im familiar with, and accept the obliga	itions of, Section	on 607. 0505 , Fig	orida Statut	es.	poratio	ins board or directors, mereby accept	ие вррошите	แลราชยู	Aisterad	
SIGNATURE	Signature, typed or proted name of registered age:	of and tale of anolical	ole (NOT	F- Registered A	oen signeture	e required	when reinstating)	DATE			ا ا
12,	OFFICERS AND			13.	90 11 19 10 10 1		ADDITIONS/CHANGES TO OFFICE		TORS	N 12	3
TITLE	D		DELETE	1.1 TITLE		P		Cha	inge [* Addition	15
NAME	ELY, MICHAEL 1010 FOREST CIRCLE			1.2 NAME							3
STREET ADDRESS CITY-ST-ZIP	WINTER SPRINGS FL 32708			1,3 S1RE 1,4 CITY-	ET ADDRESS	1					100
TITLE			DELETE	2.1 TITLE		 		☐ Cha	inge [Addition	2
NAME				2.2 NAM	1	}					
STREET ADDRESS				2.3 STRE	et address						
CITY-ST-ZIP			DELETE	2.4 CITY 3.1 TITLE		├		Cha	inne T	Addition	-
NAME			C Decerie	3,2 NAME		1		Ç.,	g		
STREET ADDRESS				1	et address						ļ
CITY-ST-ZIP				3.4. CiTY	-ST-ZIP	<u> </u>					
TITLE			☐ DELETE	4.1 TITLE				L Cha	nge L	Addition	
NAME				4. 2 NAM							
STREET ADDRESS CITY-ST-ZIP				4,3 SIRE 4,4 CITY	ET ADDRESS						1
TITLE	<u> </u>		DELETE	5.1 TITLE		 -		Cha	inge [Addition	1
NAME				5.2 NAME							1
STREET ADDRESS				5.3 STRE	ET ADDRESS						
CITY-ST-ZIP			Incierc	5.4 City -		<u> </u>		☐ Cha	100 T	Addition	┨
TITLE NAME			DELETE	6.1 TITLE 6.2 NAME		1		E CIR	nge L		
STREET ADDRESS					: Et address						
CITY-ST-ZIP				6.4 City							
	pertify that the information supplied wi	th this filing do	es not qualify fo			ed in S	ection 119.07(3)(i), Florida Statutes. I fu	rther certify the	at the inf	ormation	1

Interest demay that the monitorisation supplied with this ming does not quality for the exemption stated in Section 119.0/(3)(t). Florida Statutes. 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.

MICHAEL ELY

1/22/18

407-695-4317