

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90114 010 ***150.00

DOCUMENT # P97000008833

1. Corporation Name

ATHENA HOLDINGS, INC.

Principal Place of Business
**4545 PLEASANT HILL RD. S-104
KISSIMMEE FL 34759**

Mailing Address
**4545 PLEASANT HILL RD. S-104
KISSIMMEE FL 34759**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1997

4. FEI Number

59-3423062

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 917 N Palmway St

26 917 N Palmway St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Kissimmee

28 Kissimmee

Zip Country

Zip Country

24 34744 25 Osceola

29 34744 30 Osceola

9. Name and Address of Current Registered Agent

**LANGHAM, STEPHEN J
4545 PLEASANT HILL RD, S-104
KISSIMMEE FL 34759**

10. Name and Address of New Registered Agent

81 Name Richard Champagne
82 Street Address (P.O. Box Number is Not Acceptable)
83 329 Clermont Dr
84 City Kissimmee FL 85 Zip Code 34744

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 **Richard Champagne**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **V** ☐ DELETE
NAME **EDEN, BRIAN**
STREET ADDRESS **2100 W 76 ST, #510**
CITY-ST-ZIP **HIALEAH FL 33016**

TITLE **V** ☐ DELETE
NAME **SEMIC, DAN**
STREET ADDRESS **6115 PARSON DR**
CITY-ST-ZIP **HARRISBURG PA 17111**

TITLE **V** ☐ DELETE
NAME **KONEFF, DAVE**
STREET ADDRESS **25 YORK HILL RD**
CITY-ST-ZIP **ETTERS PA 17319**

TITLE **PST** ☐ DELETE
NAME **CHAMPAGNE, RICHARD**
STREET ADDRESS **329 CLERMONT DRIVE**
CITY-ST-ZIP **KISSIMMEE FL 34759**

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

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Richard Champagne**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)