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

PROFIT CORPORATION ANNUAL REPORT

BARBARA R. NELEN, INC.



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #**1. Corporation Name P97000021144 (5)

FILED Feb 23 1998 8:00am Secretary of State



				<u> </u>	F ({ 3,4 1 1001 1161 3161 3161 36 0
Principal Plac	e of Business	Mailing Address		1 12011201 (IS 1841) 10215 SEITH BALL SEITH SEITH	m stade isade erfer drats dift ibbi
	NG GLORY DRIVE	4530 MORNING GLORY DE	RIVE		
LAKE MARY	FL 32746	LAKE MARY FL 32746		DO NOT WRITE IN TI	IIC CDACE
				3. Date Incorporated or Qualified	115 SPACE
1				· ·	
2. Principal P	face of Business	2a, Mailing Address		03/03/1997 4. FEI Number	Applied For
	S.R. 434		Jing Glory D		Applied For
	#, etc.	Suite, Apt. #, etc.	and aloud o		Not Applicable \$8.75 Additional
Suit	FP 1049	27	-	Certificate of Status Desired	Fee Required
City & State		City & State	N :	6. Election Campaign Financing	
23 AHa	monte Springs,	1/28 LAKE MARY,	+1.	Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	ΖΦ	Country	8. This corporation owes or has paid the	
III 327	14 25 USA	29 32746 3	- / (C' P)	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	10. Name and Address of New Register	
NELEN, BARBARA 81 Namen Property				IN NOW ALCICAL (A)S	LEN, BARBARA)
4500 MODNING OLODY DONE					LCOO, DAKBAKA
LAKE MARY FL 32746			82 Street Add	fress (P.O. Box Number is NonAcceptable)	Veine
~	IL WATER LOST TO		83	TOROTTY GORY C	
			84 City	4 Mari	85 Zip Code
11. Pursuant to the provisions of Sections 607 05/12 and 607 15/38 Florida Statutes, the above named corporation submits this statement for the purpose of changing the excitational					
11. Pursuant to the provisions of Sections 607 0502 and 607 0508, 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. Thereby accept the appointment as registered					
agent ran landing with rine accent the columnity's of pection 607.0505, Florida Statutes.					
SIGNATURE FOUNDATE VIEW / IEW / 177-78 Signature typed or protect any protect payment and the of appearable (MOTE Flegistered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	DELETE	11 TOTLE	ABBITTOTION OF THE CONTROL OF THE CO	☐ Change ☐ Addition
NAME	NELEN, BARBARA R		12 NAME		
STREET ADDRESS	453 MORNING GLORY DRIVE		1.3 STREET ADDRESS		;
CITY-ST-ZIP	LAKE MARY FL 32746				
TITLE		DELETE	1.4 CITY-ST-ZIP 21 TITLE		Change Addition
NAME			2.2 NAME		C plande C Modition
STREET ADDRESS					
			2.3 STREET ADDRESS	*· · · ·	, ·
CITY-ST-ZIP		DELETE	2 4 CITY-ST-ZIP		D Atalian
TITLE			3.1 THILE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP	***************************************	
TITLE		☐ DELETE	4.1 TITLE		Change
NAME		j	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		-	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	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		
STREET ADDRESS			6 3 STREET ADORESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby 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

1-17-98