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

CORPORATION

## Sandra B. Mortham

## **FILED** Feb 16 1998 8:00am

| ANNU                          | JAL REPORT  | Secretary  | of State                                    | Secretary of Stat  | Δ               |
|-------------------------------|---|--|---|--|-----------------|
| •                             | 1998  | DIVISION OF CO   | ORPORATIONS                                 | Scordiary of Stat  | C               |
| DOCUI<br>1. Corporation       | MENT # P97000   | 0025966 (7)  |   |  |                 |
| G.A. KA                       | ARL, INC.   |  |   |  |                 |
|                               |   |  |   |  |                 |
| Principal Place               | e of Business   | Mailing Address  |   |  | / <b>4</b> E i  |
| 1010 HWY 27<br>LAKE HAMILTO   |   | 121 SANDBURG LN SE<br>WINTER HAVEN FL 33884                        |   |  |                 |
| DINE TANKIET                  | ON FL 33001   | WHITEN PHYEN PL 03004  |   | DO NOT WRITE IN THIS SPACE   |                 |
|                               |   |  |   | 3. Date Incorporated or Qualified 03/17/1997   |                 |
|                               | lace of Business  | 2a, Mailing Address  |   | 4. FEI Number Applied  | For             |
| 21 6000                       | CYPRESS GARDENS BY  | VA 26 6840 CYPESS  | SARDENS ISL                                 |  |                 |
| Suite, Apt.                   | #, OICT   | Suite, Apt. #, etc.  |   | 5. Certificate of Status Desired S8.75 Addition Fee Regulire   |                 |
| City & State                  | . 4   | City & State   |   | 6. Election Campaign Financing \$5.00 May (  | Be              |
|                               | ER HAVEN, FL  | 28 WINTER HAVI   | Country                                     | Trust Fund Contribution Added to Fee   |                 |
| Zip<br>24] <b>3388</b>        |   | 33884  | 30 USA                                      | <ol> <li>This corporation owes or has paid the current year Intanglb<br/>Personal Property Tax due June 30.</li> <li>Yes</li> </ol>              | -le             |
|                               | g, Name and Address of Curren   |  |   | 10. Name and Address of New Registered Agent   |                 |
| KARLOVICH, GEORGE A 81 Name   |   |  |   |  |                 |
| 121 SANDBURG LAN SE           |   |  | 62 Street A                                 | Address (P.O. Box Number is Not Acceptable)  |                 |
| MAIN                          | NTER HAVEN FL 33884   |  | 83  |  |                 |
|                               |   |  | 84 City                                     | 85 Zip Code  |                 |
|                               |   |  |   |  |                 |
| 11. Pursuant to office or re  | to the provisions of Sections 607.050<br>egistered agent, or both, in the State | 2 and 607.1508, Florida Statute:<br>of Florida, Such change was au | s, the above-named<br>uthorized by the corp | corporation submits this statement for the purpose of changing its registoration's board of directors. I hereby accept the appointment as regist | stered<br>tered |
|                               | m familiar with, and accept the obliga  | ations of, Section 607.0505, Flor                                  | ida Statutes.                               |  |                 |
| SIGNATURE                     | Signature, typied or printed name of registered age                             |  | Registered Agent signatura                  | required when reinstating) DATE  |                 |
| 12.                           | OFFICERS AND  | DIDIRECTORS DELETE   | 13.   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN PRESIDENT   | 12<br>Addition  |
| NAME                          |   | L.J bittit   |   | George A. Karlovich  | 10000001        |
| STREET ADDRESS                |   |  | 1,3 STREET ADDRESS                          | 121 Saubburg LH. SE  |                 |
| CITY-ST-ZIP                   |   |  | 1.4 CITY-ST-ZIP                             | WINTER HAVEN, FL 33884   | }               |
| TITLE                         |   | ☐ DELETE   | 2.1 TITLE                                   | Change L   | Addition        |
| NAME                          |   |  | 2.2 NAME<br>2.3 STREET ADDRESS              |  | 1               |
| STREET ADDRESS<br>CITY-ST-ZIP |   |  | 2.4 CITY-ST-ZIP                             |  |                 |
| TITLE                         |   | DELETE   | 31 TITLE                                    | Change   | Addition        |
| NAME                          |   |  | 3.2 NAME                                    |  | 1               |
| STREET ADDRESS                |   |  | 3.3 STREET ADDRESS                          |  | ļ               |
| CITY+ST-ZIP<br>TITLE          |   | ☐ DELETE   | 3.4. CITY-ST-ZIP<br>4.1 TITLE               | ☐ Change ☐ /   | Addition        |
| NAME                          |   |  | 4. 2 NAME                                   |  |                 |
| STREET ADDRESS                |   |  | 4.3 STREET ADDRESS                          |  |                 |
| CITY-ST-ZIP                   |   |  | 4.4 CITY-ST-ZIP                             |  |                 |
| TITLE                         |   | ☐ DELETE   | 5.1 TITLE                                   | Change I   | Addition        |
| NAME<br>STREET ADDRESS        |   |  | 5.2 NAME<br>5.3 STREET ADDRESS              |  |                 |
| CITY-ST-ZIP                   |   |  | 5.3 STREET ADDRESS                          |  | ľ               |
| TITLE                         |   | DELETE   | 6.1 TITLE                                   | Change   | Addition        |
| NAME                          |   |  | 6.2 NAME                                    |  | Ì               |
| STREET ADDRESS                |   |  | 6.3 STREET ADDRESS                          |  | J               |
| CITY-ST-ZIP                   |   |  | 6.4 CITY - ST - ZIP                         |  |                 |

14. Thereby certify that the information supplied with this filling 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 of 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 trustoe exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cylingod, or on an attachment with an address.

GEORGE A. KARLOVICH 2/10/98