FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTME OF STATE

Sandra B. Molam

Secretary of \$2 DIVISION OF CORPATIONS

<u>1998</u>

DOCUMENT # P97000032917 (1)

FILED May 11 1998 8:00am Secretary of State

| 2 | | | Mailing Address 2005 SHORELAND DRIVI | | |
|---|--------------------|--|--------------------------------------|---------------------------------|---|
| • | AUDUMPALE 1E 05020 | | NODOMIDADE TE VOCO | | DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified |
| | | | | | 04/10/1997 |
| 2. | Principal Pi | ace of Business | 2s. Mailing Address | | 4. FEI Number Applied For |
| 21 | _ | | 26 | | 59-3449542 Not Applicable |
| | Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired Fee Regulred |
| 22 | | | 27 | | |
| | City & State | ₿ | City & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| 23 | Zip | Country | 28 Zip | Cotry | 8. This corporation owes or has paid the current year Intangible |
| 24 | | 25 | 29 | 30 | Personal Property Tax due June 30. 🔀 Yes 🛄 No |
| | | g. Name and Address of Curr | ent Registered Agent | | 10. Name and Address of New Registered Agent |
| | GO | VONI, BRIAN R | | 81 Name | |
| 141 5TH STREET NORTHWEST #100 WINTER HAVEN FL 33881 | | | 100 | 82 Street Ad | oddress (P.O. Box Number is Not Acceptable) |
| | | | | | |
| | | | | 33 | |
| | | | | 14 City | FL 85 Zip Code |
| 44 | Digarant f | to the provisions of Soctions 607.0 | 502 and 607 1509. Elorida Statu | too the anya named C | personation submits this statement for the ournose of changing its registered |
| 11 | onice or re | edistered adeni. Or botti, in the 518 | ire of Fiorida. Such chande was | AUTOORZEDY ING COIDU | oration's board of directors. I hereby accept the appointment as registered |
| | agent. I a | m familiar with, and accept the ob- | ligations of, Section 607.0505, F | lorida States. | |
| SI | GNATURE | Signature, typed or printed name of registered | acont and trip if applicable (NO | TE. Registercegent signature re | required when reinstaling) DATE |
| 12 | | | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TiT | LE | D | DELETE | 1.1 100 | D, 7 Addition |
| NA | ME | Kilby, Gerald e | | 1.2 NAN | • |
| ST | REET ADDRESS | 2005 SHORELAND DRIVE | | 1.3 STRT ADDRESS | |
| CI | Y-ST-ZIP | AUBURNDALE FL 33823 | | 1.4 CITYST - ZIP | 7 UB Change X Addition |
| | LE | | DELETE | 2.1 TI1L | D. V.P. Connie Change Addition Kilby, Connie Drive 2005 Shoreland Drive Auburno4le, Floreda 33923 |
| | ME | | | 2.2 NAV | Killey, Chareland Drive |
| | REET ADDRESS | | | 2.3 STRIT ADDRESS | 2005 Short and 33923 |
| | Y-ST-20P | | DELETE | 2 4 CIT ST - ZIP | Change Addition |
| ĮĮĮ. | ME . | | [1] NEULE | 3 I IIILI 3 2 NAM | |
| | REET ADDRESS | | | 3.3 STREE ADDRESS | |
| | Y-S1-Z# | | | 3.4. CITY 51-2IP | |
| | LE | | DELETE | 4.1 101.6 | Change Addition |
| | ME | | _ | 4. 2 NAM | |
| ST | REET ADDRESS | | | 4.3 STREE ADDRESS | |
| Cf1 | Y-ST-21P | | | 4.4 CITY-IT-ZIP | |
| TIT | | | ☐ DELET E | 5.1 TITLE | Change Addition |
| NA | ME | | | 5.2 NAME | · |
| ST | REET ADDRESS | • | | 5.3 STREE ADDRESS | |
| | Y-ST-ZIP | | | 5.4 CITY - [T - ZIP | Change Addition |
| TIT | re J | | | | [] Ondrige [] Addition |
| | | | DELETE | 6.1 TITLE | |
| | ME | | ∟ DELETE | 6.2 NAME | <u> </u> |
| ST | | | L_J DELETE | | |

4. I hereby certify that the information supplied with this filling closs not qualify for the exempton stated in Section 119.07(3)(i). Florida Statutes: 1 further certify that the information supplied with this filling closs not qualify for the exempton stated in Section 119.07(3)(i). Florida Statutes: 1 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.

SIGNATURE: ~ Cornie S. Killy

1/TEE PRES

~ 4-30-98 6 941-965-0244