

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000033913 (9)

1. Corporation Name

FOUR SEASON'S SELECTIONS, INC.



Principal Place of Business

Mailing Address

304 EAST COLONIAL DRIVE
ORLANDO FL 32801

304 EAST COLONIAL DRIVE
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1997

4. FEI Number

59-3446290

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 530 S. County Rd. 427

2a. Mailing Address

26 Same as 2

Suite, Apt. #, etc.

22 Suite 100

Suite, Apt. #, etc.

27 City & State

City & State

23 Longwood, FL

28 Zip

Zip

Country

24 32750

25 Seminole

29 Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WAGNER, RICHARD A ESQ
304 EAST COLONIAL DRIVE
ORLANDO FL 32801

81 Name

Fred Knoche

82 Street Address (P.O. Box Number is Not Acceptable)

530 S. County Rd. 427, Suite 100

83

84 City

Longwood,

FL

85 Zip Code

32750

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 Fred Knoche

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

(NOTE: Registered Agent signature required when reinstating)

DATE

April 24/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D
NAME KNOCH, FRED
STREET ADDRESS 304 EAST COLONIAL DRIVE
CITY-ST-ZIP ORLANDO FL 32801

1.1 TITLE ☒ Change ☐ Addition

D
1.2 NAME Fred Knoche
1.3 STREET ADDRESS 1229 Morton, 10th Line
1.4 CITY-ST-ZIP Cavan, Ontario, Canada L0A1P0

TITLE ☐ DELETE

D
NAME BOUWMEISTER, RON
STREET ADDRESS 304 EAST COLONIAL DRIVE
CITY-ST-ZIP ORLANDO FL 32801

2.1 TITLE ☒ Change ☐ Addition

D
2.2 NAME Ron Bouwmeister
2.3 STREET ADDRESS 428 Feasby
2.4 CITY-ST-ZIP Uxbridge, Ontario, Canada T9R1R1

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
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.

CR2E034 (10/97)