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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000034851 (0)

8741 FALLING LEAVES WAY VESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 3354

FILED Feb 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

							04/17/1997			
2. Principal P	face of Business	2a. Mailing	2a. Mailing Address				4. FEI Number		Applied For	
21		26	26				65-0747896		Not Applicable	
Suite, Apt.	#, etc	Suite.	Suite, Apt #, etc.				6. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	e		City & State				8. Election Campaign Financing	\$5.0	DO May Be	
23		28					Trust Fund Contribution		ed to Fees	
Zip	Country	Country				8. This corporation owes or has paid the curre	ent vear	Intancible		
24	25	29 30		30					No	
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
SEARS, LORRIE R					81 Name					
28741 FALUNG LEAVES WAY					An Observation (D.O. Devider to Alex Accordable)					
WESLEY CHAPEL FL 33543				]*	82 Street Address (P.O. Box Number is Not Acceptable)					
WESLET CHAPEL PL 33343				le le	B3					
					84	City	FL	<b> 85</b>   2	(ip Code	
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE Signature, typind or priored harve of registered agent and title 4 applicable (NOTE, Rispistered Agent signature required when reinstating)  DATE										
12.				13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	PRISIDENT DELETE 11			1.1 TITL	.E			Chang	ge 🔲 Addition	
NAME	LORRIE R. SEARS		1 2 NAM	12 NAME				]		
STREET ADDRESS	28741 EALLING LEAVES WAY		1.3 STR	1.3 STREET ADDRESS						
CITY-ST-ZIP	William CHA	41.33	543	1.4 C/TY-		T-ZiP				
TITLE	Sergeral /	,	DELETE	21 TITLE				Chan	ge Addition	
NAME	PRISIDENT DELETE 13  LORRIE R. SCARS  28741 FALLING LEAVES WAY 13  WESLEY CHAPIK, JL. 33543  SECRETERY / TREASURE DELETE 21  DAVIS E. SCARS  28941 FALLING LEAVES WAY  WORKING CHAPICK, JL. 33543  24  WORKING CHAPICK, JL. 33543  24		2.2 NAM	2.2 NAME						
STREET ADDRESS	DENNI COLLEGE	leaven 1	WAY	2 3 STREE		ADDRESS				
CITY - ST - ZIP	MINELSON OF		33813	2. 4 CIT						
TITLE	- Lange	ن ما يحود رما	DELETE	3.1 TITLE				Chang	pe Addition	
NAME				3.2 NAM	3.2 NAME				· -	
STREET ADDRESS					ADORESS					
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CITY-ST-ZIP TITLE			DELETE	3.4. CiTY - 5 4.1 TITLE		1 - 21	· · · · · · · · · · · · · · · · · · ·	Chang	e Addition	
NAME		L. Control of the con			4. 2 NAME		•			
STREET ADDRESS					ADDRESS			ļ		
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CITY-ST-ZIP TITLE			DELETE	4.4 CITY 5.1 TITL		1 - 211"		Chang	ne Addition	
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NAME				5.2 NAME		4000000			1	
STREET ADDRESS				5 3 STREE1		ł			ļ	
CITY-ST-ZIP		The state of the s				1 - ZIP		10	an Eddina	
TITLE			DELETE	6 1 TITL			L	Chang	ge 🔲 Addition	
NAME				62 NAM						
STREET ADDRESS				63 STREET		ADDRESS			l	
CITY-ST-ZIP	<u> </u>					I-ZIP		10 22		
14. I hereby	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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a officer or director of the conservation or the receiver or frustee 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:

DAVIS (

Sean Trensynt

2/4/98 (812) 991-485