## 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 # P97000046565 (2)

## **FILED** Feb 27 1998 8:00am Secretary of State

ESCAPE REALITY, INC.					
Principal Plac	e of Business	Mailing Address		I SOULIDAD ILIDAD ANTIN DANKA DANKA	natir sairt ötöss sirði strik atíst ötti tant
22200 STATE ROAD 60 VERO BEACH FL 32966		22200 STATE ROAD 60 VERO BEACH FL 32968		DO NOT WO!	TE IN THIS SPACE
				3. Date Incorporated or Qualified	
				05/27/1997	,
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 P.O.BOX 2925		65-0155313	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional
22		27		g. Commond of Clades Desired	Fee Required
City & Stat	€!	City & State VERO BCH	PL	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 VERO BCH	Country	Trust Fund Contribution	Added to Fees
24	25	29 32761 30	¬ı ´	This corporation owes or has personal Property Tax due Jur	
	9. Name and Address of Currer	Library 187.5	<u>'</u>	10. Name and Address of New F	
CC	DBB, WILLIAM-		81 Name		
AAAAA ATATE BAAD AA			82 Street	Address (C.O. Cay Number in hist Assess	able)
VERO BEACH FL 32966			62 Street	Address (P.O. Box Number is Not Accept	able)
•			83		
			84 City		85 Zip 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. I hereby accept the appointment as registered					
agent. I a	rn familiar with, and accept the oblig	alions of, Section 607.0505, Floric	la Statutes.	portition's board of directors. Thereby dec	ept the appointment as registered
SIGNATURE	mere in an area of the second				
12.	Signature, typed or printed name of registered ap- OFFICERS AN		13.	e required when reinstaling)  ADDITIONS/CHANGES TO OFF	DATE
TITLE	D	DELETE	1.1 TITLE		Change M Addition
NAME	COBB, WILLIAM	_	1.2 NAME	TREASURET, V.P., D COBB, WILLIAM	
STREET ADDRESS	22200 STATE ROAD 60		1.3 STREET ADDRESS	122200 S.R. 60	
CITY-ST-ZIP	VERO BEACH FL 32966		1.4 CITY-ST-ZIP	VERO BCH, PL 32966	
TITLE	D	DELETE	2.1 TITLE	PRES., SEC., D.	☐ Change ☑ Addition
NAME	COBB, JANET L		22 NAME	COBB', JANET L.	
STREET ADDRESS	22200 STATE ROAD 60		23 STREET ADDRESS	22200 S.R. 60	
CITY-S1-ZIP	VERO BEACH FL 32966		2. 4 CITY-ST-ZIP	VERO BLH. FL 32966	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		<i>o</i>	4. 2 NAME		L3 Unange L3 Addition
STREET ADDRESS			4.3 STREET ADDRESS		`
CITY-ST-ZIP			4.4 CiTY - ST - ZiP		
TITLE	/ <del></del>	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 ADORESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 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 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 cocious 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 altaquipment with my address