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 # P97000053001 (8)

KELLY & CROW, P.A.

Principal Place of Business	Mailing Addres

FILED Apr 01 1998 8:00am Secretary of State



14 LAKE AVER AVON PARK F		14 SOUTH LAKE AVENU AVON PARK FL 33825	JE			DO NOT WRITE IN THIS SPA 3. Date Incorporated or Qualified 06/16/1997	ACE	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				45-0736571		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						Additional Required
City & State	9	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.0	O May Be d to Fees
Zip	Country	Z ip	\vdash	intry		8. This corporation owes or has paid the curren	nt year	
24	25] g. Name and Address of Currer	29	30	T		Personal Property Tax due June 30.		
		it neglistered Agent		81	Name	10, regins said Addison of flow riogistorou Ag		-
CROW, LON WORTH IV 14 SOUTH LAKE AVENUE AVON PARK FL 33825			82 Street Address (P.O. Box Number is Not Acceptable)					
				Oliegi Adi	Juless (F.O. Box Number is Not Acceptable)			
				83				
				84	City	FL	85 Zi	p Code
11. Pursuant t office or re agent. I ar	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	2 and 607, 1508, Florida Statu of Florida, Such change was ations of, Section 607,0505, F	utes, the a authorize Iorida Sta	bove d by tutes	rnamed co the corpora i.	rporation submits this statement for the purpose of chation's board of directors. I hereby accept the appoin	nanging ntment i	its registered as registered
SIGNATURE	Signature, typed or printed name of registered ag-	not and title it applicable (NC	TF: Bagislara	ri Ane	ner endeane In	uired when reinstating) DATE	-	
12,		D DIRECTORS	13.		The grade of	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	ORS IN 12
TITLE	D	DELETE	1.1 T	TLF			Change	
NAME	KELLY, JAMES W		1.2 N	AME				
STREET ADDRESS	98 LAKE SEBRING ROAD		1.3 S	TREET	ADDRESS	•		
CITY-ST-ZIP	SEBRING FL 33870		1.4 0	ITY-S	T - Z IP			
TITLE	D	☐ DELETE	2.1 TI	TLE			Chang	B Addition
NAME	CROW, LON WORTH IV		2.2 N	AME				
STREET ADDRESS	2030 NE LAKEVIEW DRIVE		2.3 S	TREET	ADDRESS			
CITY-ST-ZIP	SEBRING FL 33870		2.46	ITY-5	ST - ZIP			
TITLE		☐ DELET É	3.1 1	ŦLE			Change	e 🔲 Addition
NAME			3.2 N	AME				
STREET ADDRESS			3.3 S	TREET	ADDRESS			
CITY-ST-ZIP					ST-ZiP		1	
TITLE		DELETE	4.1 To	TLE		<u>L</u>	Change	e Addition
NAME			4. 2 N	IAME				
STREET ADDRESS			4.3 \$	TAEET	ADDRESS			
CITY-ST-ZIP				ITY-S	1-ZIP	···	3 00	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE		☐ DELETE	5.11			L	Chang	e 🔲 Addition
NAME			5.2 N					
STREET ADDRESS					ADDRESS	· ·		
CITY-ST-ZIP				TY-S	1-ZIP	· · · · · · · · · · · · · · · · · · ·	1 06	A 4001
TITLE	_	☐ DELETE	6.1 T			L	Change	e 🔲 Addition
NAME		1	6.2 N	AME				
STREET ADDRESS	/	1	6.3 S	TREET	ADDRESS			
CITY-ST-ZIP		the the filing door not qualify		TY-S		Coston 140 07/3/6) Elecida Statutes I further cartif		

4. 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 is it 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 for on an attachment with an address.

2/25/AR VBU1-452-75/09