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 # P97000057421 (4)

Principal Place of Business	Mailing Address		
235 POSTLINE RD.	235 POSTLINE RD.		
SANFORD FL 32771	SANFORD FL 32771		

FILED May 08 1998 8:00am Secretary of State

PLONIDA BOLAN SANASOTA, INC	٠,			<u> </u>
Principal Place of Business	Mailing Address			ji
235 POSTLINE RD.	235 POSTLINE RD.			
SANFORD FL 32771	SANFORD FL 32771			
			DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address	· 	07/01/1997 4. FEI Number Applied F	
21 235 Coastline Rd		astline		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	ast inc	Not Applied 5 Contificate at Status Positive 1 \$8.75 Addition	
22	27		5. Certificate of Status Desired Fee Required	iai
Cilus State	City & State	j	6. Election Campaign Financing \$5.00 May Be	
23 Sanford FL	28 Santond	PL.	Trust Fund Contribution Added to Fees	
Zip >>> / Country	⁷¹¹ 2177/	Country	8. This corporation owes or has paid the current year Intangible	
24 32771 25 US	29 30 111	30 45	Personal Property Tax due June 30. Yes No	
9. Name and Address of Curre		01 None	10. Name and Address of New Registered Agent	
OORPORATION SERVICE COMPA	NY	81 Name	vest, SKiD	1
-1201 HAYS STREET		82 Street Ado	lugs (P.O. Box Number is Not Asceptable)	10
TALLAHASSEE FL 82901-2525		83	871 Lake lerrace will	1 <u>e</u>
		63		l
		84 City	-USTIS FL B5 ZIPSCOPIETO	$\overline{\mathbf{M}}$
41 Pursuant to the provisions of Spelione 607.05	SO2 and 607 1509 Florida Ctalut	on the above period per	-UST 13 FL SW /c	16
office or registered agent, or both, in the stal	le of florida Such change was a	outhorized by the corpora	poration submits this statement for the purpose of changing its regist ation's board of directors. I hereby accept the appointment as register	red
	(julians of Secti on 607.0505, Flo	orida Statutes.	1/10/00	
SIGNATURE Showing typing opposed name of registery dia	event and vice that disable (NO1)	Registered Agont signature requ	ired when reinstating) 7 / DATE	— l
	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<u>;</u>
TITLE D	DELETE	1.1 TITLE		dilion
NAME WEST, SKIP		1.2 NAME	1841 Lake Terrace Drive	.
STREET ADDRESS 265 PROMENADE CIR.		1.3 STREET ADDRESS		_
CITY-ST-ZIP CHEATHROW FL 82748		1.4 CITY-ST-ZIP	Eustis FL 32726	
TITLE	DELETE	2.1 NITLE	/ Change Ad	dition
NAME		2.2 NAME		1
STREET ADDRESS		2.3 STREET ADDRESS		İ
City-St-ZiP	DELETE	2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE	L. Change L. Ad	ldition
NAME OTOTET ADDRESS		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	3.4. CITY-ST-ZIP	Change Ad	dition
NAME	C) office		Grange AO	uitiVII
STREET ADDRESS		4.2 NAME		
CITY-ST-ZIP		4.3 STREFT ADDRESS		}
TITLE	DELETE	4 4 CITY-ST-ZIP 51 TITLE	☐ Change ☐ Adu	dition
NAME		5.2 NAME	- Stange - From	
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CiTY - S1 - ZiP		- 1
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Ado	dition
NAME		6.2 NAME	,	
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-S1-ZIP		
	with this filing does not qualify to		Section 119.07(3)(i). Florida Statutes, I further certify that the informa	tion

indicated on this annual report or supplementary of the corporation of the Block 12 or Block 13 if changed, or on an a is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an approvered a execute this report as required by Chapter 607, Florida Statutes; and that my name appears in