

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

FILED
Mar 30 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 # P97000071432 (3)
 1. Corporation Name
LITTLE MANATEE SPRINGS, INC.



Principal Place of Business: **310 PEARL AVE. SARASOTA FL 34243**
 Mailing Address: **310 PEARL AVE. SARASOTA FL 34243**

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
08/18/1997

2. Principal Place of Business

21	4337 Hamlin Way	26	4337 Hamlin way
22		27	
23	Wimauma, FL	28	Wimauma, FL
24	33598	29	33598
25	US	30	US

4. FEI Number: **65-0775798**
 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

9. Name and Address of Current Registered Agent
BODDEN, JOHN
310 PEARL AVE.
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable) 4330 Ham Sweet Orange Dr.
83	
84	City Wimauma
85	Zip Code FL 33598

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BODDEN, JOHN	
STREET ADDRESS	310 PEARL AVE.	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LEWELLAN, JOSEPH	
STREET ADDRESS	500 N. JEFFERSON AVE., #5A	
CITY-ST-ZIP	SARASOTA FL 34237	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WEIGEL, THEODORE	
STREET ADDRESS	6323 STONE RIVER RD.	
CITY-ST-ZIP	BRADENTON FL 34203	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SCHMIDT, ROBERT	
STREET ADDRESS	971 OHLINGER RD.	
CITY-ST-ZIP	BABSON PARK FL 32827	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	4310 Sweet Orange Dr
1.4 CITY-ST-ZIP	WIMAUMA, FL 33598
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	4337 Hamlin Way
2.4 CITY-ST-ZIP	WIMAUMA, FL 33598
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	4293 Hamlin Way
3.4 CITY-ST-ZIP	Wimauma, FL 33598
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: _____ **3/26/98 813634 2305**

CR2E034 (10/97)