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May 07, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000073327

1. Corporation Name
S & R ENTERPRISES, INC.



Principal Place of Business
~~8901 W CRYSTAL ST
CRYSTAL RIVER FL 34428~~

Mailing Address
~~8901 W CRYSTAL ST
CRYSTAL RIVER FL 34428~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 5220 W. Gulf to Lake Hwy
Suite, Apt. #, etc.

22 City & State
Lecanto, FL

24 Zip
34461

25 Country
USA

2a. Mailing Address

26 5220 W. Gulf to Lake Hwy
Suite, Apt. #, etc.

27 City & State
Lecanto FL

29 Zip
34461

30 Country
USA

3. Date Incorporated or Qualified

08/25/1997

4. FEI Number

59-3474934

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 the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

LARDER, WILLIAM H JR
~~8901 W CRYSTAL ST
CRYSTAL RIVER FL 34428~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5220 W. Gulf to Lake Hwy

83

84 City
Lecanto

FL

85 Zip Code
34461

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME LARDER, LOLA A
STREET ADDRESS 5036 W. DEMSEY LN
CITY-ST-ZIP 40606 AUSA FL 34446

TITLE V
NAME LARDER, WILLIAM H JR
STREET ADDRESS 5036 W. DEMSEY LN
CITY-ST-ZIP 40606 AUSA FL 34446

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 1002 N. Rock Crusher Rd
1.4 CITY-ST-ZIP Crystal River FL 34429

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 1002 N. Rock Crusher Rd
2.4 CITY-ST-ZIP Crystal River FL 34429

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-28-99 (352) 746-4385

CR2E034 (1/198)