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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000074506 (1)

ARO OF CENTRAL FLORIDA, INC.

Principal Place of Business

500 S. PARK AVE., STE. 202

Mailing Address

500 S. PARK AVE., STE. 202

**FILED** May 19 1998 8:00am Secretary of State



WINTER PARK FL 32789		WINTER PARK FL 32789		DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified	
					08/26/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number <b>59-847</b> /4/3	Applied For
21		26 PO 60X	1720		59-3414413	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	<u>e</u>	City & State 28 WINTER F	PARIL	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	ZID-0.00	Countr	y	8. This corporation owes or has paid the curr	ent year Intangible
24	25	29 5/2/190	30			Yes No
, <u>.</u>	9. Name and Address of Current	Registered Agent		т	10. Name and Address of New Registered A	gent
	CE, PAMELA O		81	Name		
201 E PINE ST., STE. 1200			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
ORL	LANDO FL 32801					
			83			
•			84	City	Fi	85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statu	ites, the abov	e-named cor	ropration submits this statement for the purpose of	changing its registered
office or re agent. I a	egistered agent, or both, in the State om familiar with, and accept the obligation	of Florida, Such change was tions of, Section 607,0505, F	authorized b	y the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	entment as registered
SIGNATURE						
	Signature, typed or punest name of nighterest anem OFFICERS AND		11: Registered Ag	ent signature requ	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 12
12. TITLE	DPS OFFICE AS ASIC	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	HOLLER, ROGER W JR.		1.2 NAME			
STREET ADDRESS	500 S. PARK AVE., STE. 202			T ADDRESS		
CITY-ST-ZIP WINTER PARK FL 32789			1.4 CHY-:			
TITLE	DV	DELETE	2.1 TRUE	51-716		Change Addition
NAME	HOLLER, ROGER W III	(2)	2.2 NAME			
STREET ADDRESS	500 S. PARK AVE., STE. 202			I ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		2. 4 City-			
TITLE	DV	☐ DELETE	3.1 1ITLE	31-111	\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{	Change Addition
NAME	HOLLER, CHRISTOPHER A		3.2 NAME	]		
STREET ADDRESS	500 S. PARK AVE., STE. 202			TADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		3.4. CiTY-	į.		
TITLE	DVT	DELETE	4 1 10TLE			Change Addition
NAME	HOLLER, JULIETTE E		4. 2 NAME			
STREET ADDRESS	500 S. PARK AVE., STE. 202		4.3 STREE	T ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		4.4 CITY-1			
TITLE		DELETE	51 1IILE			Change Addition
NAME			5.2 NAME			45
STREET ADDRESS			5.3 STREE	T ADDRESS		ای دیا
CITY-ST-ZIP			5.4 CHY-	ST-ZIP		5.141
TITLE		DELETE	61 TITLE		EUUUUSEUEE:	Change Addition
NAME			6.2 NAME	1	<b>60000250653</b> -04/30/980103600	)(4
STREET ADDRESS			6.3 STREE	ADDRESS	***2700.D0	די
CITY-ST-ZIP			6.4 CITY-	ST - <b>Z</b> IF*	4.1	
44 15 5	74 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	1 0 2 6 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		T	- Carrier 440 O 1975 Philippi Chattana I f when an	differ the state of the state of the state of

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statities. I further certify that the informatio 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.