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 # P97000074858 (6)

EPHDEERWOOD, INC.

Principal Place of Business

Mailing Address

FILED Mar 23 1998 8:00am Secretary of State



359 CAROLINA AVE. WINTER PARK FL 32789		359 CAROLINA AVE. WINTER PARK FL 32789		DO NOT WOITE IN THE	CDACE		
_					DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 08/28/1997	SPACE	
2. Principal Place of Business 2a, Mailing Addres					4. FEI Number	Ap	plied For
21		26			59-3465615	No	t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75	Additional
22	,	27			5. Certificate of Status Desired	Fee Re	
City & State	9	City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	•
Žip	Country	Zip	Count	y	8. This corporation owes or has paid the cu	urrent year Int	angible
24	25 29 30			Personal Property Tax due June 30. Yes No			
	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered	i Agent	
JAC	COBY, GREG		В	1 Name			
359 CAROLINA AVE. WINTER PARK FL 32789				2 Street Add	dress (P.O. Box Number is Not Acceptable)		
4411	TIEN PANK FL 32708		8	3			
			8	4 City	FI	85 Zip (Codie
44 Purcuant	to the provisions of Sections 607 (1)	502 and 607 1508. Florida Statut	es the abo	ve-named co			ts registered
office or r	egistered agent, or both, in the Sta	te of Florida Such change was	authorized	by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as	registered
agent La	m familiar with, and accept the obl	igations of, Section 607.0505, FR	orida Statut	es.			
SIGNATURE	Signature, typed or printed name of registered a	MOT	E. Dogistared A	aant eignature race	uired when reinstaling) DATE		
12.		ND DIRECTORS	13.	Aeut si Bustone rech	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TITLE		Abbilliono, of the last of the	Change	Addition
NAME	PUGH, JAMES H JR.		1.2 NAM			_	:
STREET ADORESS	359 CAROLINA AVE.			ET ADDRESS			i
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CHTY				
TITLE	D	DELETE	2.1 TITLE			Change	Addition
NAME	SELBY, C. THOMAS	_	2.2 NAM				
STREET ADDRESS	250 INTERNATIONAL PKY.,	STE. 150		ET ADDRESS			
CITY-ST-ZIP	HEATHROW FL 32746	0.0.		- ST-ZIP			
TITLE	7,00	DELETE	3.1 TITLI			Change	Addition
NAME		_	3.2 NAM	1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		DELETE	4.1 TITL			Change	Addition
NAME			4. 2 NAN				
STREET ADDRESS			- 1	ET ADORESS			
CITY-ST-ZIP			1	- ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME		—	5.2 NAM	1			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		DELETE	6.1 TITL			Change	Addition
NAME			6.2 NAM			=	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				
GIT-SI-ZIF			9.7 0111	U- 44			

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.

CICNATURE.