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 # P97000083169 (7)

SANTA FE TRUST, INC.

rincipal Place of	Business	Mailing

4505 8. GOLDENROD RD. ORLANDO FL 32822

SIGNATURE:

Address

4505 S. GOLDENROD RD. ORLANDO FL 32822

FILED Apr 21 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

							<u> </u>			
2. Principal Pi	lace of Business	28	. Mailing Address				4. FEI Number	A	pplied For	
21		26						1 N	ot Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27					b. Certificate of Status Desired	Fee R	equired	
City & State City & State 28						6. Election Campaign Financing	\$5.00	\$5.00 May Be		
						Trust Fund Contribution Added to Fees				
Zıp	Country		Zip	Cou	intry		8. This corporation owes or has paid the	current year In	tangible	
24	26	29		30			Personal Property Tax due June 30.	Yes [] No	
	9. Name and Address of Curren	t Regi	stered Agent		1		10. Name and Address of New Registers	e Agent		
ZIEGLER, JACK					61	Name				
4505 S. GOLDENROD RD.										
ORLANDO FL 32822			Street Address (P.O. Box Number is Not Acceptable)							
				83						
4										
					84	City		. 85 Zip	Code	
			53.4550.51		Ш		F			
11. Pursuant t	to the provisions of Sections 607.0503 egistered agent, or both, in the State	of Flori	607.1508, Florida Statu da. Such change was	utes, the al authorize	d by	e-named corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the a	a of changing a	its registered s reaistered	
agent. I ar	m familiar with, and accept the obliga	itions o	f, Section 607.0505, F	lorida Stat	utes	i.	on's board of directors. I hereby accept the a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
SIGNATURE										
	Signature, typied or printed runne of registered age			Off Registere	d Age	nt signature require				
12.	OFFICERS AND	DIRE		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	D		☐ DELETE	3.1 T(TLE	-		Change	Addition	
NAME	WHITTINGTON, KEELY			1.2 N/	AME					
STREET ADDRESS	4505 S. GOLDENROD RD.			1.3 \$1	AEET	ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32822			1.4 CI	1Y-51	T- <i>Z</i> IP				
- TITLE	D		☐ DELETE	2.1 TJ	TLE			☐ Change	Addition	
NAME	WHITTINGTON, NERISSA			2.2 N	4ME					
STREET ADDRESS	4505 S. GOLDENROD RD.			23.81	RFFT	ADDRESS				
CITY-SY-ZIP	ORLANDO FL 32822			2.40						
TITLE			DELETE	3.1 10				Change	Addition	
NAME I				32 N						
					-					
STREET ADDRESS						ADORESS				
CITY-ST-ZIP					ITY-S	IT-ZIP				
TITLE			☐ DELETE	4.1 10		1		Change	Addition	
NAME				4 2 N	AME	ĺ				
STREET ADDRESS				4.3 \$1	AEET.	ADDRESS				
CITY-ST-ZIP				4.4 CI	1Y-51	T- 21P				
TITLE			☐ DELETE	5.1 TJ	TLE	- T		Change	Addition	
NAME				5.2 NA	AME	1				
STREET ADDRESS				5.3 \$1	REET.	ADDRESS				
CITY-ST-ZIP				5.4 CI						
THLE			DELETE	6.1 TI		-"		Change	Addition	
NAME				6.2 NA		1				
				1		***************************************				
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP	and that the information	the Ale for	Clina dood and arrest	6.4 Cr	1Y-S1	I-ZIP	Cooling 440 07/2VI) Elector Charles 15 -0-	postification at	informatica	
indicated of the block 12 of	erniy that the information supplied wi on this annual report or suppliemental director of the corporation or the rece or Block 13 if changed, or on an attac	in reas Lannua liver or chynent	Treport is true and ac trustee empowered to with an address	curate and execute t	d the his r	ion stated in S at my signature eport as requi	section 119.07(3)(i), Florida Statutes. I further a shall have the same legal effect as if made ired by Chapter 607, Florida Statutes, and thi	under oath; tha at my name ap	at I am an opears in	