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 #
1. Corporation Name P97000103215 (4)

DECKER FAMILY CORPORATION

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			
4141 SO FLA		4141 SO FLA AVE			
LAKELAND FL 33813		LAKELAND FL 33813		DO NOT WRITE IN THIS SPACE	
				<u> </u>	
				3. Date Incorporated or Qualified 12/09/1997	
2 Principal P	Place of Business	2a, Mailing Address		4. FEI Number Applied For	
21		26		59-3494966 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CO 7E Additional	
22		27		5. Certificate of Status Desired Fee Required	
City & Stat	9	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zıp	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. Yes No	
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
DE	CK E R, JAMES E		81 Name		
4141 \$ 0 FLA AVE			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
LA	KELAND FL 33813		0.000,700	railess (1.10. box rightbol is not recopiable)	
			83		
			0.4 Cia	IOP I 7:n Oodo	
			84 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508, Florida St	alutes, the above-named co	orporation submits this statement for the purpose of changing its registered	
office or r	registered agent, or both, in the St im familiar with, and accept the of	ate of Florida. Such change w digations of Section 607 0505	as authorized by the corpor - Florida Statutes	ration's board of directors. I hereby accept the appointment as registered	
-	or arma with, and doop, the or	ingularia al, acator dar lacado	, rioriod otoratos.		
SIGNATURE	Signature, typed or printed name of requirement	egent and tille (Trpicable)	NOTE: Registered Agent signature rec	quired when reinstating) DATE	
12	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	Hesident	DELETE	1.1 TITLE	Change Addition	
NAME)	James E. DI 4141 5 Florida	ECKER	1.2 NAME		
STREET ADDRESS	4141 5 Floride	= Ave	1.3 STREET ADDRESS		
CITY-ST-ZIP	hakeland Fl		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE	Change Addition	
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE	-	☐ DELETE	3.1 TITLE	Change Addition	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34. CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE	☐ Change ☐ Addition	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST-ZIP		
TITLE	:=	☐ DELETÉ	5.1 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY - ST - ZIP		
TITLE	· · · · - · · · - · · ·	☐ DELETE	6.1 TITLE	Change Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I hereby o	certify that the information supplied	with this filing does not quali	y for the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
officer or	director of the corporation or the r	eceiver or trustee empowered	to execute this report as re	ature shall have the same legal effect as if made under oath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in	
Block 12	or Block 13 if changed, or on an a	ittachment with an address.	•		