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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S05620

(7)

C. P. CARETAKING, INC.

**FILED** Apr 22 1997 8:00am Secretary of State



r nncipai riac	o of Duninger	Mailing Address			10	
Principal Place of Business Mailing Address  3824 SOUTH FLORIDA AVENUE 3824 SOUTH FLORIDA AVENUE						
3824 SOUTH F LAKELAND FL		LAKELAND FL 33813-1105				
				3. Date Incorporated or Qualified 10/08/1990	3a. Date of Last 07/09/1996	Report
2. Principal F	lace of Business	2a. Mailing Address	***************************************	4. FEI Number	1 14	Applied For
1 2060	80 Foot Ra.	26 2060 80 FC	ot RQ.	59-3030070		ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.0	May Be
3 Bar		28 Bartow,	4-1	Trust Fund Contribution		to Fees
Zip	Country		Country	8. This corporation has liability for it		s. 199.032,
4 <u> </u>	830 25 POIK 9. Name and Address of Current	29 33830 30	POIK	Florida Statutes  10. Name and Address of New Reg	Yes No	
		Hofisteren Water	81 Name	10. Halle and Address of New He	heteren vilour	
	.l., W. Garvie 4 South Florida Avenue					
	ELAND FL 33813		82 Street Add	dress (PBBox Number is Not Acceptable CODI RE	(e)	
UAN	EDANU PL 33013		83	o bo root the		
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			84 City	12-701/1 (	FL 85 5	タタマ
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes, th	e above-named co	ropration submits this statement for the n		its registered
office or	registered agent o both, in the State	of Florida. Such change was author	rized by the corpore	rporation submits this statement for the p ation's board of directors. I hereby accen	t the appointment e	s registered
agent 1 a	arn familia, with, <b>Log s</b> cent the obliga	10712 5 Gerschi 607.0505, Florida	Statutes.	ulak	7-7	
6.611431.51		KI LIK KLE		7 1 11 1		
SIGNATURE	Charles to trend a printed and a dispersed area	ANOTE Post	crored Agon) signed we requ	Wired whos reincloting)	DATE	
	Signature, typied or printed name of registered ager Of FICERS AND		stered Agent signature requ		DATE ERS AND DIRECTO	RS IN 12
12.	OFFICERS AND	DIRECTORS	13.	uired when rehelating)  ADDITIONS/CHANGES TO OFFIC	D. 112	
<b>12.</b>	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
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The complete statutes are mornious supplied with this annual report or supplies not quality 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes are not an anachment with an address.

**SIGNATURE:**