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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # HIR DICHTOHE INC

(7)

FILED Feb 20 1998 8:00am Secretary of State

пар	Olfnus, INC.										
Principal Plac	e of Business	M	ailing Address		·		O TODRINOTO PRO FRONTO PRARO TURRO ORFAR AFOR OF	IAN DADIA BIL	ii eien eie		
1560 PALM PLACE 1560 PALM PLACE											
BARTON FL			ARTOW FL 33830-72	29			DO NOT WRITE IN	THIS SP.	ACE		
							3. Date Incorporated or Qualified				7
							01/10/1991			·	╛
	Place of Business		Mailing Address	. 21		_	4. FEI Number			pplied For	_
	ISHERMAN'S LANDING	26	4117 FISHERA	hans r	4 WEAN	<u> </u>	59-3052921			ot Applicable	긔
Suite, Apt.	. #, OIC.	27	Suite, Apt. #, etc.				5, Certificate of Status Desired]		Additional equired	1
City & Stat			City & State	Javed	FL	· · · · · · ·	6. Election Campaign Financing			May Be	7
23 WINTE		28 WINTER HAVE					Trust Fund Contribution L	<u> </u>		to Fees	4
Zip 24 3388	Country 25 U.S.A	\vdash	33884		Country USA		8. This corporation owes or has paid to				
24 3388	9 Name and Address of Curren	29		30	71		Personal Property Tax due June 30. 10. Name and Address of New Regist			No	\dashv
140		ii riogis	telea ngoin		81 Nam	е	10, Name and Address of New Regist	torou Ay	-		\dashv
	HITE, HARRY E.										
1560 PALM PLACE					82 Stree	t Addres	ss (P.O. Box Number is Not Acceptable)				1
BA	RTOW FL				B3 411		ISHEDMAN'S LANDING				┨
									_		ı
					84 City	12,10	er Haven	FL	85 Zip	Code	7
44 Pureuant	to the provisions of Sections 607.050	2 and 6	07 1508 Florida Sta	tutes the a	hove-name		ration submits this statement for the purp			ts registered	-
office or i	registered agent, or both, in the State	of Florid	da. Such change wa	is authorize	d by the co	orporatio	n's board of directors. I hereby accept the	ne appoir	itment as	registered	1
•	am familiar with, and accept the oblig	ations of	r, Section 607.0505,	Florida Sta	utes.						l
SIGNATURE	Signature, typed or printed name of registered age	eol and litie	it applicable (I)	OTE: Registere	d Agent signate	ure required	when reinstating)	DATE			١,
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICER		IRECTO	RS IN 12	-{}
TITLE	DP	_	DELET E	1.1 Ti	TLE	1			Change	Addition	75
NAME	WHITE, HARRY E.			1.2 N	AME			•	~		
STREET ADDRESS	1560 PALM PLACE			1.3 \$1	REET ADDRESS	. u.r.	7 FISHERMAN'S LANDING				R
CITY-ST-ZIP	BARTOW FL			1.4 0	TY-ST-ZIP	437	UTER HAVEN FL 3388	34			Š
TITLE	DST		DELETE	2.1 TI	TLE	1			Change	☐ Addition	7
NAME	WHITE, KARRIE J.			2.2 N	\ME	İ	• •	•			ı
STREET ADDRESS	1560 PALM PLACE			2.3 5	REET ADDRESS	411	7 FISHERMANIS LANDING	_			
CITY-ST-ZIP	BARTOW FL			2.40	ITY-ST-ZIP	Wil	7 Fisheamanis Landing UTER HAVEN FL 33884	_			1
TITLE	DVP		☐ DELETE	3.1 TI		7			Change	Addition	1
NAME	WHITE, DAVID E.			3.2 N	ME						
STREET ADDRESS	124 MOCKINGBIRD DRIVE			3.3 S	REET ADDRESS	5					İ
CITY-ST-ZIP	AMERICUS GA			3.4. 0	ITY-ST-ZIP						
TITLE			DELETE	4.1 TI	ſĹĔ				Change	Addition	1
NAME				4. 2 N	AME						
STREET ADDRESS				4.3 \$1	REET ADDRESS	;					
CITY-ST-ZIP				4.4 Ci	TY-ST-ZIP						
TITLE			DELETE	5.1 TI		T			Change	Addition	1
NAME				5.2 N/	IM E						l
STREET ADDRESS				5.3 ST	REET ADDRESS	s					
CITY-ST-ZIP				5.4 C	TY-ST-ZIP						
TITLE			☐ DELETE	6.1 TI		1			Change	☐ Addition	٦
NAME				6.2 N/	ME						
STREET ADDRESS				6.3 ST	REET ADDRESS	s					Į
CITY-ST-ZIP				6.4 CI	TY-ST-ZIP						1

14. Thereby 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 of 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 joyon an attagement witt an eagless.

(au) 224-4659