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

FILED Jul 08 1998 8:00am Secretary of State

Principal Place		` '	8	DO NOT WRITE IN THI	
				05/30/1991	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-3068500	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the d	
24	25		30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registere	d Agent
	UTOHFIELD, JACK E.		81 Name		
122- b (Innerva Road Dayt on a beach FL 32118			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
υ Λ	HONN BENON PE SELIE		83		
			84 City		85 Zip Code
	_ <u>:</u>			corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	
SIGNATURE	im familiar with, and accept the oblig Signature, typed or pointed name of registered as OFFICERS AN		Registered Agent signature r	equired when reinstaling) ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE .	D	☐ DELETE	1,1 TrTLE		Change Addition
NAME	ORUTCHFIELD, JACK E.		1.2 NAME		
STREET ADDRESS	122 MINERVA ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DAYTONA BEACH FL	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	FORGUSON, RANDY M.	☐ DECERE	2.1 IIILE 2.2 NAME		Cl cuarge Cl Addition
STREET ADDRESS	141 N. CUCUMBER LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	NEW SMYRNA BCH FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREFT ADDRESS		
CITY-ST-ZIP TITLE		DEIFTE	3.4. CITY - ST - ZIP		☐ Change ☐ Addition
NAME		LJ DETITE	4.1 THILE 4. 2 NAME		briange Modition
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Therese	5.4 CITY - ST - ZIP		T Observe T season
TITLE		☐ DELETE	6.1 TITLE	,	Change Addition
NAME OTREET ADDRESS			6.2 NAME	`	
STREET ADDRESS			6.9 STREET ADDRESS		
CITY-ST-ZIP			6.4 CtTY-ST-ZIP		

14. 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 rocciver 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.

JACK E. CRUTCH FLORIDA.