

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

FILED

Feb 10 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S97815** (2)  
1. Corporation Name  
**CAPITAL ACQUISITIONS OF CENTRAL FLORIDA, INC.**

Principal Place of Business

205 E. CENTRAL BLVD.  
SUITE 600  
ORLANDO FL 32801  
US

Mailing Address

205 E. CENTRAL BLVD.  
SUITE 600  
ORLANDO FL 32801  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **9243 Point Cypress Dr.**  
Suite, Apt. #, etc.

22

City & State

23 **Orlando, FL**

Zip

Country

24 **32836**

25

**USA**

2a. Mailing Address

26 **9243 Point Cypress Dr.**  
Suite, Apt. #, etc.

27

City & State

28 **Orlando, FL**

Zip

Country

29 **32836**

30

**USA**

3. Date Incorporated or Qualified

**12/04/1991**

4. FEI Number

**59-3096493**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**TURCHI, RAY P  
205 E. CENTRAL BLVD.  
SUITE 600  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name

**Angelo R. Teeter**

82 Street Address (P.O. Box Number is Not Acceptable)

**9243 Point Cypress Dr.**

83

84 City

**Orlando**

FL

85

Zip Code

**32836**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, printed or printed name, of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**2-6-98**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	TEETER, ANGELO R	205 E. CENTRAL BLVD., SUITE 600	ORLANDO FL	<input type="checkbox"/>
D	TURCHI, RALPH P	205 E. CENTRAL BLVD., SUITE 600	ORLANDO FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
		9243 Point Cypress Dr.	Orlando, FL 32836	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
		9243 Point Cypress Dr.	Orlando, FL 32836	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>

14. I 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 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, or on an attachment with an address.

SIGNATURE

*[Signature]*

**2-6-98 876-5606**

CR2E034 (1097)