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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V24467

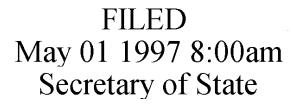
(5)

GREATER ORLANDO MOVING & STORAGE, INC.

2458 N. FORSYTH RD.
ORLANDO FL 32807
110

Principal Place of Business

Mailing Address





2458 N. FORSYTH R ORLANDO FL 32807 US	no.	2458 N. FORSYTH RD. ORLANDO FL 32807-6430 US			3. Date Incorporated or Qualified 03/27/1992	3a. Date of Last Report 09/03/1996		
2. Principal Place	of Business	2a. Mailing Address			4. FEI Number	1 00/0		Applied For
21 2420 NiForsyth Rd 26 13808 Bel				ln	59-3114027	Not Applicable		
Suite, Apt. #, etc	C.	Suite, Apt. #, etc.				\$8.75 Additional		
22		27			5. Certificate of Status Desired			Required
City & State		City & State	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6. Election Campaign Financing		\$5.00	May Be
23 orlando	FL	28 orlando	F		Trust Fund Contribution			to Fees
Zφ	Country	Zip	h	untry	8. This corporation has liability for in			s. 199.032,
24 32807 25 Orange 29 32826 9, Name and Address of Current Registered Agent			30 (
		nt Registered Agent	.	81 Name	10. Name and Address of New Reg	jistered A	gent	
	S, RANDALL E			81 Name				
	FORSYTH RD.			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)		
ORLAND	O FL 32807			83				
			1	63	•			
				84 City		FL	85 Zip	Code
44 5	Continue CO7 OC	00 and CO7 1500 Florida Ptat	too the	hous named sore	poration submits this statement for the p		hanaina	ite registered
agent Lani far SIGNATURE	miliar with and accept the oblig	gations of, Section 607.0505, I	Florida Sta	atutes. ed Agent signature requi	tion's board of directors. I hereby acception is board of directors. I hereby acception is a second of the second	DATE	<u> </u>	
12.	OFFICERS AN	ID DIRECTORS	13		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	JRS IN 12
TILLE VP		DELETE	DELETE 1.1			Τ.	Change	Addition
NAME MU	Jllins, Kathy		1.2	NAME				
	808 Belles in			STREET ADDRESS				
CITY-ST-ZIP OF	RLANDO FL			CITY-ST-ZIP				
Tifle		☐ DELETE	2.1	TITLE		ί	Change	Addition
NAME			4 "	NAME				
STREET ADDRESS				STREET ADDRESS				
CITY - ST - ZIP		DELETE		CITY-ST-ZIP			7 0	1 424004
TIPLE		∐ DELETE		TITLE		. L	Change	Addition
NAMÉ				NAME				
STREET ADDRESS				STREET ADDRESS				
C-TY - ST - ZIP		DELETE		CITY-ST-ZIP			Change	Addition
NAME				NAME		•		
STREET ADDRESS				STREET ADDRESS				
City - ST - 7IP			*	City-St-ZIP				
TITLE		☐ DELETE		TETLE			Change	Addition
NAMt			5.2	NAME				
STREET ADDRESS			5.3	STREET ADDRESS				
CHTY ST-ZIP			5.4	CITY-ST-ZIP				
TITLE		DELETE		TITLE			Change	Addition
NAME			62	NAME				
STHEET ADDRESS			63	STREET ADDRESS				
CITY-S1-ZiP			64	CITY-ST-ZIP				

14. I do 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 frue 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.