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 Mar 11 1998 8:00am Secretary of State

	MENT # V2675 C. Freeman, Inc.	8 (5)					
Principal Place	e of Business	Mailing Address			1 JOOJI BRADAN IJORO BILLI IDOOL DIKUL IBAK BRAR DIAH	I SIBII DIDII DIDI	
P.O. BOX 137		POB 1378					
SANIBEL FL 33957 SANIBEL FL 33957					DO NOT WRITE IN THIS SPACE		
03					3. Date Incorporated or Qualified		
					04/02/1992		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21		26			_65-0319255		ot Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional equired
City & State	0	City & State			A Station Committee State of the state of th		
23	•	28			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the cu		
24	25	29	30				No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	
SU	san M. Freeman		- {'	B1 Name			
1575 SERENITY LANE P.O. BOX 1378			ļī	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
	NIBEL FL 33957		l _i	83			
OA.	NIDEL I E 33937		Ļ				
				B4 City	FL	85 Zip	Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.05 egistered agent, or both, in the Statem familiar with, and accept the oblig	02 and 607.1508, Florida State of Florida Such change way ations of, Section 607.0505,	tutes, the ab- s authorized Florida Statu	ove-named cor by the corpora ites.	rporation submits this statement for the purpose cation's board of directors. I hereby accept the app	of changing it pointment as	ts registered registered
SIGNATURE	Signature, typod or printed name of registered as	ent and tile if Analicable (N	OTF Registered	Agent signature regu	ulrad when reinstating) DATE		
12.		ID DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE	DPV	☐ DELETE	1.1 Tota	.E		Change	Addition
NAME	Freeman, John C. II		1.2 NAM	AE			
STREET ADDRESS	1575 SERENITY LANE		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	SANIBEL FL			Y-ST-ZIP			
TITLE	DST	DELETE	21 1111	I		Change	Addition
NAME	FREEMAN, SUSAN M.		2.2 NAA	1			
STREET ADDRESS	1575 SERENITY LANE			EET ADDRESS	er de		
CITY-ST-ZIP TITLE	SANIBEL FL	DELETE	2. 4 C/T	Y-ST-ZIP		Change	Addition
NAME		L. Oitell	3.7 NA	·		-1 Almillo	ابوسود. ہے
STREET ADDRESS				FFT ADDRESS			
CITY-ST-ZIP				Y-S1-ZIP			
TITLE		DELETE	4.1 TITL			Change	Addition
NAME			4. 2 NA	ME			1
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP		· · · · · · · · · ·		r-ST-ZIP			
TITLE		DELETE	5.1 TATE			Change	Addition
NAME			5.2 NAN				Ì
STREET ADDRESS				EET ADORESS			i
CITY-ST-ZIP		☐ DELETE		r-ST-ZIP		Chapte	Addition
TITLE		F"I DETELE	6 1 TITL	Į.		Change	☐ Addition
NAME expect apopece			6.2 NAA				
STREET ADDRESS			0.3 S I H	EET ADDRESS			

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 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

SIGNATURE:

SIGNATURE