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

POCUMENT # V37527

(1)

BUDGET PRINTING, INC.

FILED May 06 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address			a consit asimble foits sount proid tibe	T CORFIC MEINDAR TIEIT ENDAT MILITA LEUR REGEL MIDES MIDIT MINITA DENTE (NOC)			
805 NATIONAL PL LONGWOOD FL 32750 US		205 NATIONAL PL LONGWOOD FL 32 US							
					3. Date incorporated or Qualifit 05/18/1992		ate of Last F /08/1996	Report	
2. Principal Pl	ace of Business	2a. Mailing Addres	SS		4. FÉI Number		A	pplied For	
21		26			59-3122723			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt, #, e	tc.		5. Certificate of Status Desired	X		Additional equired	
City & State		City & State			6. Election Campaign Financing	 _	\$5.00	May Be	
23		28			1rust Fund Contribution				
Zip	Country	Zip	Zip Country		8. This corporation has liability	or intangible	tax under s	s. 199.032,	
24	25	29	30		Florida Statutes	Yes			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New	Registered	Agent		
COV	vart, paula L		<u> </u>	B1 Nam	е				
307 BIRCH TERRACE				B2 Stree	et Address (P.O. Box Number is Not Accept	otable)			
WIN	TER SPRINGS FL 32708			0	Officer Address (1.0. Box Hamber to Hat Acceptable)				
				B3					
ĺ			Ţ	B4 City		FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607 05	02 and 607 1508. Florida	Statutes the ab	Ove-namo	nd cornoration submits this statement for the			its registered	
office or r	egistered agent, or both, in the State	e of Florida Such chang	was authorized	by the co	d corporation submits this statement for the proporation's board of directors. Thereby act	cept the app	pointment as	registered	
	m familiar with, and accordine onlig	zerione of Geotion 607.03	<i>y</i>) 4	Lili	8/97	,	
SIGNATURE	Signature, tyled of printed name of rog stred ag	gent and title if applicable.	(NOTE Besistand	Acent signati	ure required when reinstating)	DATE	0/9/		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO O	FICERS AN	D DIRECTO	RS IN 12	
TiTLE	þ	☐ DELE	TE 1.17(T)	.€			Change	Addition	
NAME	COWART, PAULA L.		1.2 NAI	ME	1			1	
STREET ADDRESS	714 S. EDGEMON AVE.		1.3 STF	EE1 ADDRESS	307 BIRCH TERR	ACE			
CITY-ST-ZIP	WINTER SPRINGS FL			Y-ST-ZIP					
TITLE		☐ DELI			D		Change	Addition	
NAME			2.2 NAJ	ME	Jefficy W. Cow 307 Birch Terra	a ut			
STREET ADDRESS			2.3 516	EE1 ADDRESS	307 Birch Terra	ce		ľ	
CITY-ST-ZIP			2 4 CII	Y-S1-ZIP	Winter Springs, Fr	327	v 8		
TITLE		DEU	TE 3.1 1111	.E	 		Change	Addition	
NAME			3.2 NAI	ME				ľ	
STREET ADDRESS			3 3 BTR	LET ADDRESS	s				
CITY-ST-ZIP			3.4. CI	Y-ST-ZIP					
TITLE		DELI					Change	Addition	
NAME			4. 2 NA	ME	1				
STREET ADDRESS			4.3 \$TR	EET ADDRESS	5			1	
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP				1	
TITLE		DELE					Change	Addition	
NAME			5.2 NAM	ИE					
STREET ADDRESS				EET ADDRESS	5				
CITY-ST-ZIP			.	y - S1 - ZIP				1	
TATLE		DELE					Change	Addition	
NAME			6.2 NAM				•		
STREET ADDRESS				EET ADDRESS	s 			İ	
CITY-ST-ZIP	•			Y-\$T-ZIP					
	by certify that the information supplied	od with this filing does no			stated in Section 119.07(3)(i), Florida Sta	utes. I furthe	or 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 effort as it made under oath; that I am an officer or director of the compration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 or on an attackmonth with an address.

4/18/92 (407) 83/2446