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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V38354

(9)

OBY C. PEADEN & ASSOCIATES, INC.

**FILED** Jan 24 1997 8:00am Secretary of State



	Place of Business	Mailing Address				-{		I BILL AFFORT BILLAND	
4583 JERNIGAN RD MILTON FL 32571		4563 JERNIGAN RD	4583 JERNIGAN RD						
US FL	. 323/1	MILTON FL 32571-1921 US				3. Date Incorporated or Qualifi 05/21/1992		Date of Last 6	Report
2. Principa	at Frace of Business	2a. Mailing Address				4. FEI Number			pplied For
21		26				59-3118824		N	ot Applicable
Suite, A	Apt #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional lequired
Orty & S	State	City & State				6. Election Campaign Financin Trust Fund Contribution	° 🗆		May Be to Fees
Zip	Country	Zip		intry		8. This corporation has liability	~		s. 199,032,
4	25	29	30	····-		Florida Statutes		No No	
	9. Name and Address of Curr	ent Hegistered Agent		81	Name	10. Name and Address of New	/ Register	rea Agent	
	CRAIN, JR. O			["]	name				
	10555 GOODRANGE DR.			82	Street Addr	ess (P.O. Box Number is Not Acce	ptable)		
N	MILTON FL 32583-8202			83		·····		<del></del>	
				84	City			<b>85</b> Zip	Code
agent. SIGNATUR	Signature hypercontributes internal registered a		Florida Stat				DAT		o registered
					· vig intole ruiqui	ed when renstating)	Uni		
12.	OFFICERS A	IND DIRECTORS	13.			ADDITIONS/CHANGES TO O		AND DIRECTO	RS IN 12
·	D	AND DIRECTORS  DELETE	13. 11 TC					AND DIRECTO Change	
THLE	D PEADEN, OBY C.		1.1 Tr 1.2 Nz	TLE AMÊ					
TITLE NAME	D PEADEN, OBY C. 4563 JERNIGAN RD.		1.1 Tr 1.2 Nz	TLE AMÊ	DORESS				
TULE Name Street adore City - St. Zai:	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL	☐ DELETE	1.1 T( 1.2 N/ 1.3 S) 1.4 C(	TLE AME TREET A ITY - ST -	DDRESS			☐ Change	Addition
TOLE NAME STREET ADORS OUTY- ST. Zer TITLE	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL DST		1.1 TC 1.2 NV 1.3 ST 1.4 CC 2.1 TC	TLE AME TREET A ITY - ST -	DDRESS				Addition
THLE NAME STREET ADORS CHY-ST ZH THLE NAME	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL DST PEADEN, LILLIE	☐ DELETE	1.1 Tf 1.2 N/ 1.3 ST 1.4 Cl 2.1 Tf 2.2 N/	TLE AME TREET A ITY - ST - TLE AME	DDRESS ZIP			☐ Change	Addition
TOLE  NAME STREET ADDRE CITY ST ZIL  TITLE NAME STREET ADDRE	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL DST PEADEN, LILLIE 4563 JERNIGAN RD.	☐ DELETE	1.1 Tr 1.2 N/ 1.3 S1 1.4 CI 2.1 Tr 2.2 N/ 2.3 S1	TLE AME TREET A ITY - ST - TLE AME TREET A	DDRESS ZIP			☐ Change	Addition
THEE NAME STREET ADDRE CHY-ST ZH- THE NAME STREET ADDRE CHY-ST ZIP	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL DST PEADEN, LILLIE 4563 JERNIGAN RD. MILTON FL	☐ DELETE	1.1 Tf 1.2 Nv 1.3 S1 1.4 Cf 2.1 Tf 2.2 Nv 2.3 Sf 2.4 Cf	TLE AME TREET AI ITY-ST- ITLE AME TREET A	DDRESS ZIP			☐ Change	Addition
TORE NAME STREET ADDRE CITY ST. ZIC TALE NAME STREET ADDRE CITY ST. ZIC TITLE	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL DST PEADEN, LILLIE 4563 JERNIGAN RD. MILTON FL DP	☐ DELETE	1.1 Tf 1.2 Nv 1.3 S1 1.4 Cf 2.1 Tf 2.2 Nv 2.3 Sf 2.4 Cf 3.1 Tf	TLE AME TREET A ITY-ST- ITLE AME TREET A ITY-ST	DDRESS ZIP			☐ Change	Addition
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TITLE  NAME  STREET ADDRE CITY- ST. ZIT.  TELLE  NAME STREET ADDRE CITY- ST. ZIP  TITLE  NAME STREET ADDRE CITY- ST- ZIP  TITLE	D PEADEN, OBY C. 4563 JERNIGAN RD. MILTON FL DST PEADEN, LILLIE 4563 JERNIGAN RD. MILTON FL DP PEADEN, KEVIN P. 4416 COPPERWOOD PLACE PACE FL 32571 DV PEADEN, MATTHEW B. 4416 COPPERWOOD PL PACE FL 32571	DELETE  DELETE	11 Ti 12 Nv 1.3 Si 1.4 Ci 2.1 Ti 22 Nv 2.3 Si 2.4 C 3.1 Ti 3.2 Nv 3.3 Si 3.4 C 4.1 Ti 4.2 Nv 4.3 Si 4.4 Ci	TLE  AME  TREET AI  TITY - ST  TLE  AME  TITET AI  TITY - ST  TLE  AME  TREET A  TLE  TREET A  TLE  TREET A  TREET A  TREET A	DDRESS -ZIP  DDRESS -ZIP  DORESS -ZIP			Change Change Change	Addition  Addition
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Too 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 if each 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 ou an attachment with an address.

**SIGNATURE:** 

Daytmu Ptione #