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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

FILED May 01 1998 8:00am Secretary of State

HANDLEY ENTERPRISES, INC.						
					 	
Dala of and Disc.	- Decision	At To Add				
Principal Place of Business		Mailing Address				
3240 PLEASANT HILL RD 3240 PLEASANT HILL R Kissimmee Fl 34746 Kissimmee Fl 34746		3240 PLEASANT HILL RD				
NOOMMEE !	. 44/40	MODIMMEL IL 94740		DO NOT WRITE IN THIS	SPACE	
ļ				3. Date Incorporated or Qualified		
			·	08/06/1992		
⊢ `	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt.	# 610	Suite, Apt. #, etc.		59-3142791	Not Applicable	
22	₩, ₩.C.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the c		
24	25	29 30	0	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	1 Agent	
HANDLEY, JOAN E 81 Name						
3240 PLEASANT HILL RD			82 Street Addr	et Address (P.O. Box Number is Not Acceptable)		
KIS	SIMMEE FL 34746		83			
			63			
			84 City	FI	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation				poration submits this statement for the purpose	of changing its registered	
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.						
1		· /	hou 6. NO	Sandley 4/24	148	
	Joan E. Hand Signature, typed or printed name of registered ag		gistered Agont signature requir			
12.		ID DIRECTORS //	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition	
TITLE NAME	PD Handley, Joan E	□ Street	1.1 TITLE 1.2 NAME		L Change Acciden	
STREET ADDRESS	3240 PLEASANT HILL RD.		1.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		1.4 CITY-ST-ZIP			
TITLE	VPD	DELETE	2.1 TITLE	——————————————————————————————————————	☐ Change ☐ Addition	
NAME	CLANCY, MICHAEL K		2.2 NAME		-	
STREET ADDRESS	3240 PLEASANT HILL RD.		2.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		Louisse	3.4. CITY - ST - ZIP		T 05	
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY+ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME		_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-S1-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

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 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 Joan F. Handley