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 # V68113

LAKE WALES FINANCE COMPANY, INC.

(2)

FILED Jan 17 1997 8:00am Secretary of State



AME WALES FL 386S3 AME WALES FL 386S3 AME WALES FL 386S3 A Date incorporated or Qualified Say, Digital Control 100/28/1992 2. Principal Flace of business	Oringinal Otac	o of Business	Mailing Address				KKRKA DADAK DADAK DIDAK DIDEK BADAK KRDI	
ARE WALES FL 3883 ANE WALES FL 38834-554 3. Date incorporated or Quaffied								
Principal Flace of Business 2a. Mailing Address 5. Service 59-3187411 Applicat For Service 59-3187411 Applicat For Service 59-3187411 Service	*** *** ***							
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Suite. Apt which is stated to status Destined \$8.75 Auditional Fee Required \$9.000 April 1. Pursuant to the provisional of registered agent or registered agent ag	2. Principal F	lace of Business	2a. Mailing Address	Mailing Address			Applied For	
Cry State	21		26		59-3187411	Not Applicable		
City & State 2	Suite, Apt	#, etc.	<u>├</u> ─┐		5. Certificate of Status Desired			
			City & State					
B. Name and Address of Current Registered Agent HARNESS, JOHN 841 US HWY 27 S LAKE WALES FL 33853 82 Sized Address (P.O. Box Number is Not Acceptable) 83	Zip	Country	Zip	Countr	у	8. This corporation has liability for i	ntangible tax under s. 199.032,	
HARNESS, JOHN 841 US HWY 27 S LAKE WALES FL 33853 10.	24	25	29	30				
HAVE SET ADDRESS LAKE WALES FL 33853 B2 Street Address (P.O. Box Number is Not Acceptable)		9. Name and Address of Curre	ent Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered Agent	
LAKE WALES FL 33853 84 City	HARNESS, JOHN				Name			
LAKE WALES FL 33853 83				82	Street A	ddress (P.O. Box Number is Not Acceptab	le)	
11. Pursuant to the provisions of Sections 607 00:02 and 607 1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both in the State of Frindia. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in an far-halar with, and accept the obligations of, Section 607 5505. Florida Statutes. SIGNATURE Signature Signature required where residing DATE	LAK	E WALES FL 33853						
11. Pursuant to the provisions of Socions 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. For familiar with, and accept the obligations of, Section 607 0505. Florida Statutes SIGNATURE Description of State of State of Florida Statutes Control of State of Florida Statutes				83				
11. Pursuant to the provisions of Sections 607 (8:02 and 607 15:08. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of office or registered agent 1 am familiar with, and accept the obligations of, Section 607 (5:05. Florida Statutes, SIGNATURE) SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS 15. DHARNESS, JOHN 16. INTEL 16. INTEL 17. INTEL 18. INTEL				84	City		FI 85 Zip Code	
CROTE Registred Appel signature remailaring CATE	office or i agent. I a	registered agent, or both, in the Sta	te of Florida. Such change wa	s authorized b	v the corp	corporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered	
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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 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 fin an attachment with an address.

SGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

676-0647

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