## 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

DOCUMENT #

(1)

## **FILED** Feb 12 1998 8:00am Secretary of State

	REGEN	CY MAN	OR,	INC.						i	
Principal Place of Business						Mailing Address					
252 U.S. HWY 17/SO, 5TH ST. EAGLE LAKE FL 33839 US					1255 12TH ŜT. N. EAGLE LAKE FL 33839 US						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
2	Principal P	cipat Place of Business				2a, Mailing Address					10/19/1992 4, FEI Number Applied For
21	•	52 4.8. Huy 17/50.5th 4			26 1255 12th SE. N.					59-3159241 Not Applicable	
<b>-</b> ''	Suite, Apt.	ite, Apt. #, etc.			150	Suite, Apt. #, etc.					A0 75
22		-			27	27] —					5. Certificate of Status Desired Fee Required
	City & State	& State GLE LAKE, FL			28	City & State 28 EAGLE LAKE, F					6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
-	Zip	Country			Zip Co					8. This corporation owes or has paid the current year Intangible	
24	338		25	POLK	29	33839	30	PO	<u>LK</u>		Personal Property Tax due June 30. Yes No
<u> </u>		9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent
٧		govern,						81	l Na	ame S.	SAME AS CURRENT
	1255 12TH STREET								Sti	reet Addres	ess (P.O. Box Number is Not Acceptable)
	EAGLE LAKE FL 33839					;			-		
									'[		
									Cit	ty	85 Zip Code
	A D										FL V P
11.	<ol> <li>Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the abordice or registered agont, or both, in the State of Florida Such change was authorized agont. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statu</li> </ol>									mea corpo corporatio	oration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
	agent. La	m familiar v	žith, a	nd accept the obligati	ons o	f, Section 607.0505, F	torida S	Statute	S.		
SIC	SNATURE	Closet as tops		led name of registered agent	nood talle	il accele able	II. Donie	lored An	san ain	natura sanuisad	red when reinstating) DATE
12		aignature, type	CI OF THE	OFFICERS AND				13.	Jent BiO	nature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITL		DVPS				DELETE		.1 TITLE			☐ Change ☐ Addition
NAN	NAME MCGC		BOVERN, ANNE			_		1.2 NAME			-
STR	EET ADDRESS	1255 12TH ST.				1.3		1.3 STREET ADDRESS		ess	
CITY	1-51-ZIP		EAGLE LAKE FL						1.4 CITY-ST-ZIP		
FITL		PTD				DELETE		1 TITLE			Change Addition
NAME		SMITH, ARLEY R				2			2.2 NAME		
STREET ADDRESS		460 BINGHAM DRIVE				2.3			2.3 STREET ADDRESS		
CITY-ST-ZIP		EAGLE LAKE FL 33839							ST-ZIP	, <u> </u>	
TITL	E					DELETE	3.	1 TITLE		]	Change Addition
NAM	AE .						3.	2 NAME			
STR	EET ADDRESS						3.	3 STREET	t addr	ESS	
_	(-\$1-7IP							4. CITY-	ST-ZIP		
TITL						☐ DELETE		1 TITLE		1	Change Addition
NAM								2 NAME		-	
STA	EET ADDRESS								4.3 STREET ADDRESS		
	r-ST-ZIP	<u> </u>				Dories			4.4 CITY-ST-ZIP		
TITL						☐ DELETE		1 TITLE			Change  Addition
NAM	1						- 1	2 NAME			
	EET ADDRESS							3 STREET		1	
CITY	r-\$1-ZIP					DILETE	_	4 CITY-5 1 TITLE	SI-ZIP		Change Addition
l	l					المام الما		2 NAME		- [	Unange D Addition
NAM	. 1								T ADDO		
ľ	ÉET ADORESS							3 STREET		E33	
	Lhereby c	ertify that the	na info	rmation supplied with	this f	iling does not quality		4 City-S		stated in Si	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 on an attachment with an address.