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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name 747513

(0)

E.A.A. 635, OF DELAND, FLORIDA, INC.

FILED									
Jan 27	1997 8:00am								
Secre	etary of State								

) (2011) 120) 241) 120) 2011 SANDA SANDA XANDA 1111 EASTA 2121 XANDAX 2124 EASTA 2410 EASTA 1224 (222)

Principal Place	e of Business	Mailing Address				, 18811 18811 81911 12881 81181 118 84	*** ***** ***	,, <i>p</i> .e., 41411 4 7	
C/O BOB LEE AIRPORT.CR 15A WILLIAM G. RACE P. O. BOX 843 20 LAZY EIGHT DR. DELAND FL 32721-7843 DAYTONA BEACH FL 32124-6 US		871 6							
					3. Date Incorporated or Qualified 3a. Date of Last Report 06/05/1979 01/24/1996				
	lace of Business	2a. Mailing Address				Number		A	pplied For
21		26				59-2589636		N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Ce	rtificate of Status Desired	(X)		Additional tequired
City & Stat	е	City & State			6. Ele	ction Campaign Financing		\$5.00) May Be
23		28				st Fund Contribution			to Fees
Zip	Country	Zip	Country		3	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No			
24	25 9. Name and Address of Curre		30			rida Statutes L me and Address of New Ro			
 	g, manic and Addition of Culton		18	31 Name	10. 140		· · · · · · · · ·		
DACE W	/ILLIAM G.				Add (5.5	D. D. J. J. H. A.	L 1 - N		
	EIGHT DR.			32 Street	Address (P.O.	Box Number is Not Accepta	DIÐ)		
	, P.O. BOX 843		1	33	,				· · · · · · · · · · · · · · · · · · ·
	A BEACH FL 32124		\ <u>-</u>					[2-1-9-	0.4
				City			FL	_ /-	Code
11. Pursuant	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 617, 1508, Florida Statute	s, the abo	ove-name	corporation su	ubmits this statement for the	ourpose o	of changing	its registered
agent. La	registered agent, or both, in the State am familiar with, and accept the oblig	ations of, Section 617.0503, Flo	rida Statu	tes.	poration's boar	o of directors, I hereby acce	brine abi	pommenta:	s registered
SIGNATURE	hulen 15	for TRE	RSUI	NKR -			1-1	11-9	7
	Signature, typed or printed name of registered ag			Agent signatu	required when reins		DATE	D DIDEOTO	DO 151 40
TITLE	DEFICERS AN	ID DIRECTORS DELETE	13.	г	T	DITIONS/CHANGES TO OFFI	CERS AN	Change	
NAME	CORNWELL, O H "BERT"	BEEE/E	1.2 NAA		\			0/بران سے	
STREET ADDRESS	907 E. RICH AVE.			iil Eet address	İ				
CITY-SI-ZIP	DELAND FL			reti aduness Yestezip					
TITLE	VP	☐ DELETE	2.1 T(TL			, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Change	Addition
NAME	BROWN, CALVIN	***************************************	2.2 NAA						
STREET ADDRESS	2678 WILMHURST RD.			EET ADORESS		t wet			
CITY-ST-ZIP	DELAND FL		2. 4 CIT	Y-ST-ZIP					
TITLE	8	DELETE	3.1 TITL					Change	Addition
NAME	JAMIESON, CHARLES M.		3.2 NAM	ME					
STREET ADDRESS	506 HOGLE		3.3 STR	eet address					
CITY-ST-ZIP	DELAND FL			Y-ST-ZIP					
TITLE	D	☐ DELETE	4.1 TITL		D	e 10 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	r	(X) Change	Addition
NAME	von Bernewitz, B.F.		4. 2 NA		UON 13)	UKNEW 11 - 131	P	^	
STREET ADDRESS	718 RIVERSIDE DR.			EET ADORESS	3153	ERNEWITZ BI WHISPER WD FL 32	アケリ		e p j
CtTY - ST - ZIP	ORMOND BCH. FL	[] ATLET	_	Y-ST-ZIP	DELA	ND FL 32	124		
TITLE	T	☐ DELETE	5.1 TITE					☐ Change	Addition
NAME	RACE, WILLIAM G.		5.2 NAM						
STREET ADDRESS	20 LAZY EIGHT DR.			EET ADORESS					
CITY-ST-ZIP	DAYTONA BEACH FL		5.4 CIT	Y-ST-ZIP	l				

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 1-11-97 904-788-0074

6.4 CITY-ST-ZIP

61 TITLE

62 NAME

6.3 STREET ADDRESS

D

MEEKER, FRED

2620 EGRET VLG.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

IN CHEZZO S SIGNATURE AND TYPER SURER
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

Change

Addition

Daylime Phone #0002520