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Mar 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K58754** (8)
1. Corporation Name
LA BELLE VENTURE, INC.



Principal Place of Business: 505 GREENWOOD AVE SE, LEHIGH ACRES FL 33908-4025, US
Mailing Address: 505 GREENWOOD AVE SE, LEHIGH ACRES FL 33972-4025, US

3. Date Incorporated or Qualified: 01/17/1989
3a. Date of Last Report: 03/26/1996
4. FEI Number: 65-0097503
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-23)
2a. Mailing Address (26-28)
24. Zip: 33972
25. Country

9. Name and Address of Current Registered Agent
WAFER, S. JANE
505 GREENWOOD AVE SE
LEHIGH ACRES FL 33908

10. Name and Address of New Registered Agent (81-84)
85. Zip Code: FL 33972

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.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS
1.1 TITLE: DP [] DELETE
1.2 NAME: WAFER, RAY J.
1.3 STREET ADDRESS: 505 GREENWOOD AVE SE
1.4 CITY-ST-ZIP: LEHIGH ACRES FL
2.1 TITLE: DST [] DELETE
2.2 NAME: WAFER, S. JANE
2.3 STREET ADDRESS: 505 GREENWOOD AVE SE
2.4 CITY-ST-ZIP: LEHIGH ACRES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: [] Change [] Addition
1.2 NAME:
1.3 STREET ADDRESS:
1.4 CITY-ST-ZIP: ZIP 33972
2.1 TITLE: [] Change [] Addition
2.2 NAME:
2.3 STREET ADDRESS:
2.4 CITY-ST-ZIP: ZIP 33972

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 on an attachment with an address.

SIGNATURE: *S. Jane Wafer* S. Jane Wafer 3/5/97 941-368-9567
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)