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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # L22279 (8)
1. Corporation Name
EAST CENTRAL FLORIDA SERVICES, INC.

Principal Place of Business Mailing Address
C/O JOHN L. KING C/O JOHN L. KING
1700 13TH ST STE 1 1700 13TH ST STE 1
ST CLOUD FL 34769 ST CLOUD FL 34769

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/12/1989	3a. Date of Last Report 02/18/1994
21	22	26	27	4. FEI Number 59-2996410	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23	24	28	29	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KING, JOHN L. 1700 13TH ST STE 1 ST CLOUD FL 34769				81 Name	KING, JOHN L.		
				82 Street Address (P.O. Box Number is Not Acceptable)	13754 DESERET LANE		
				83			
				84 City	ST. CLOUD	FL	85 Zip Code

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 constituting) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CREER, JOHN W.	1 2 NAME	
STREET ADDRESS	139 E. SOUTH TEMPLE ST.	1 3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	1 4 CITY - ST - ZIP	
TITLE	D	2 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FACER, WAYNE G.	2 2 NAME	VD
STREET ADDRESS	60 E. SOUTH TEMPLE ST.	2 3 STREET ADDRESS	SPENCER, GEORGE S.
CITY - ST - ZIP	SALT LAKE CITY UT	2 4 CITY - ST - ZIP	13754 DESERET LANE
TITLE	D	3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMOREAUX, ROBERT D	3 2 NAME	
STREET ADDRESS	50 E. NORTH TEMPLE ST.	3 3 STREET ADDRESS	
CITY - ST - ZIP	SALT LAKE CITY UT	3 4 CITY - ST - ZIP	
TITLE	D	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENHO, PAUL L.	4 2 NAME	
STREET ADDRESS	13754 DESERET LANE	4 3 STREET ADDRESS	
CITY - ST - ZIP	ST. CLOUD FL	4 4 CITY - ST - ZIP	
TITLE	PD	5 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, JOHN L.	5 2 NAME	P
STREET ADDRESS	1700 13TH STR STE 1	5 3 STREET ADDRESS	KING, JOHN L.
CITY - ST - ZIP	ST CLOUD FL	5 4 CITY - ST - ZIP	1700 13TH ST STE 2
TITLE	VS	6 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, R. BRUCE	6 2 NAME	T
STREET ADDRESS	1700 13TH STR STE 1	6 3 STREET ADDRESS	COOK, KENT L.
CITY - ST - ZIP	ST CLOUD FL	6 4 CITY - ST - ZIP	13754 DESERET LANE
			ST. CLOUD, FL 34773

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 checked, or on an attachment with an address.

SIGNATURE:  Kent L. Cook Date: 4-20-95

22279

Florida Department of State
Division of Corporations

To Whom It May Concern:

Additional Directors for East Central Florida Services are:

D
Wayne G. Facer
60 E. South Temple Street
Salt Lake City Ut

SD
Charles Whipple
139 E. South Temple St.
Salt Lake City Ut

D
Gregory L. Williams
712 South Oregon Avenue
Tampa Fl.