## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. FEI Number 3. Suric, Apt. #, etc. 3. Suric	a of Last Report  5/1936  Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
Principal Flace of Eusiness	a of Last Report  5/1936  Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
### PRINGS FL 32708    Principal Place of Business   2e   Mailing Address   4. FEI Number   59-1677918	a of Last Report  5/1936  Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
Principal Place of Business   2e. Mailing Address   4. FEI Number   5e-1677918	5/1996 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
2. Principal Place of Business   2. Mailing Address   4. FEI Number   59-1677918   Surie, Apt. #, etc.   Suite, Apt. #, etc.   5. Certificate of Status Desired   City & State   City & State   6. Election Campaign Financing   Trust Fund Contribution   Trust Fund Contribution   Zip   Country   Zip   Country   8. This corporation has liability for intangible to Florida Statutes   Yes   30   Principal Place of Place o	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
Suite, Apt. #, etc.    Suite, Apt. #, etc.	\$8.75 Additional Fee Required  \$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
City & State	Fee Required  \$5.00 May Be Added to Fees ax under s. 199.032, No gent  Style="background-color: right;">B5 Zip Code
Trust Fund Contribution   Zip Country Zip Country B. This corporation has flability for intangible to Florida Statutes	Added to Fees ax under s. 199.032. No gent  Style="background-color: right;">B5 Zip Code
9. Name and Address of Current Registered Agent  WHIPPLE, GEORGE A. 231 SHELLPOINT E. MAITLAND FL 32751  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 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 apposite agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Disputation, fysical or provide name of registered agent and feel if applicable in NOTE: Registered Agent signature required when reliabilisting)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. STREET ADDRESS  CHY-ST-ZIP  MAITLAND FL 32751  14. CITY-ST-ZIP  MAITLAND FL 32751  14. CITY-ST-ZIP  MAITLAND FL 32751  14. CITY-ST-ZIP  MAITLAND FL 32751  15. STREET ADDRESS  CHY-ST-ZIP  MAITLAND FL 32751  16. STREET ADDRESS  ALTAMONTE SPRINGS FL 32714  24 CITY-ST-ZIP	gent  85 Zip Code
9. Name and Address of Current Registered Agent  WHIPPLE, GEORGE A. 231 SHELLPOINT E. MAITLAND FL 32751  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 coffice 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 appoint I am familian with, and accept the obligations of, Section 607.0506, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  PD  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. TITLE  PD  DELETE  11. TITLE  WHIPPLE, GEORGE A.  13. SIRRET ADDRESS  CITY-ST-2P  MATLAND FL 32751  14. CITY-ST-2P  MATLAND FL 32751  VP  DELETE  21 TITLE  VHIPPLE, JAMES S  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  450 BAKER AVENUE  22 STREET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  SIRRET ADDRESS  450 BAKER AVENUE  22 STREET ADDRESS  SIRRET ADDRESS	gent
### PPL GEORGE A.  231 SHELLPOINT E.  MAITLAND FL 32751  ### City  FL  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 confice 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 appoint agent I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. DITLE  PD  WHIPPLE, GEORGE A.  231 SHELLPOINT EAST  1.3 SIRRELADORESS  CITY-ST-ZIP  MATLAND FL 32751  1.4 DITY-ST-ZIP  WHIPPLE, JAMES S  450 BAKER AVENUE  21 STREET ADDRESS  CITY-ST-ZIP  ALTAMONTE SPRINGS FL 32714  24 City  Street Address (P.O. Box Number is Not Acceptable)  B83  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  Street Address (P.O. Box Number is Not Acceptable)  B83  B84 City  FL  B83  B84 City  FL  B83  B84 City  FL  B83  B84 City  FL  B83  B84 City  Florida Statutes, the above corporation's board of directors. I hereby accept the apporation of the purpose of corporation's board of directors. I hereby accept the apporation of the purpose of city and city accept the apporation of the purpose of city accept the apporat	
MAITLAND FL 32751  83  84 City  FL  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 confince 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 apposagent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature:  Signature:  Signature:  Signature:  Signature:  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11.1 TITLE  WHIPPLE, GEORGE A.  231 SHELLPOINT EAST  1.3 STREET ADDRESS  City-St-2iP  MAITLAND FL 32751  1.4 City-St-2iP  WHIPPLE, JAMES S  450 BAKER AVENUE  ALTAMONTE SPRINGS FL 32714  2 4 City-St-2iP	
B3   B4   City   FL	
FL.  Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of confice or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the apposance of the apposa	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of 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 apposance of agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATUFE    Signature typed or probled name of registered agent and tire if applicable   INOTE: Registered Agent signature required when reinstating)   DATE	
agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or probled nome of registered agent and title if applicable iNOTE Registered Agent signature required when relinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND INITIAL  WHIPPLE, GEORGE A.  12 NAME  STREET ADDRESS  CITY-ST-ZIP  MATLAND FL 32751  14 CITY-ST-ZIP  TITLE  VP  DELETE  21 TITLE  VP  DELETE  21 TITLE  VP  DELETE  22 NAME  STREET ADDRESS  450 BAKER AVENUE  CITY-ST-ZIP  ALTAMONTE SPRINGS FL 32714  24 CITY-ST-ZIP	changing its registered intment as registered
THILE PD DELETE 1.1 TITLE  NAME WHIPPLE, GEORGE A. 12 NAME  STREEL ADDRESS COLY-ST-ZIP MAITLAND FL 32751 1.4 CITY-ST-ZIP  TITLE VP DELETE 21 TITLE  NAME WHIPPLE, JAMES S STREEL ADDRESS STREEL ADDRESS 450 BAKER AVENUE 2.2 NAME CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 2.4 CITY-ST-ZIP  2 4 CITY-ST-ZIP	
WHIPPLE, GEORGE A. 231 SHELLPOINT EAST 1.3 STREET ADDRESS CHY-ST-ZIP MATLAND FL 32751 1.4 CITY-ST-ZIP WHIPPLE, JAMES S 450 BAKER AVENUE CHY-ST-ZIP ALTAMONTE SPRINGS FL 32714 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 22 NAME 23 STREET ADDRESS 34 ALTAMONTE SPRINGS FL 32714 24 CITY-ST-ZIP 25 ALTAMONTE SPRINGS FL 32714	
STREET ADDRESS  231 SHELLPOINT EAST  CHY-ST-ZIP  MATLAND FL 32751  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  TITLE  VP  VP  LDELETE  21 TITLE  CHY-ST-ZIP  ALTAMONTE SPRINGS FL 32714  1.3 STREET ADDRESS  2.4 CITY-ST-ZIP  1.3 STREET ADDRESS  2.4 CITY-ST-ZIP  1.3 STREET ADDRESS  2.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP	Change Addition
MATLAND FL 32751	
WHIPPLE, JAMES S STREET ADDRESS 450 BAKER AVENUE CITY-ST-7/P ALTAMONTE SPRINGS FL 32714 2 4 CITY-ST-ZIP	
STREET ADDRESS 450 BAKER AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP	Change Addition
DITY-SI-ZIP ALTAMONTE SPRINGS FL 32714 2 4 DITY-SI-ZIP	
THE S DELETE 3.1 TITLE	Change Addition
NAME NOLDER, CYNTHIA 3.2 NAME	
STHEET ADDRESS 451 BAKER AVENUE 3.3 STREET ADDRESS	
CITY-ST ZIP ALTAMONTE SPRINGS FL 32714 34. CITY-ST-ZIP TOTALE DELETE 4.1 TITLE	Change Addition
TATE L. DELETE 4.1 YITLE L. DELETE 4.2 NAME	
STREET ADDRESS 43 STREET ADDRESS	
CTY - ST - 7/P J. 4.4 CTY - ST - 2/P	
· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME 52 NAME	
SIRSELADORESS 5.3 STREELADORESS 5.3 STREELADORES	
	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CHY-ST-7IP 6.4 CHY-ST-2IP	
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 information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as I am an officer or director of the constitution. The receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; an appears in Block 12 or Block 12 or Block 14.	

Date

**FILED** 

Apr 16 1997 8:00am