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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997		HIEE!	DIVISION OF	CORPORAT	IONS	Secretary of State		
	MENT # 54541 St & Miller Corp.	8	(6)					
						CORRECTION DIRECTION AND ALLEY CHARLES		14H 316H HIII
Principal Plac	ce of Business	Mailing	Address				HINN BOOK BOOK BIRK	(1)
6180 BIG BEND P O BOX 758 I GIBSONTON FI	NA	P O 80	6180 BIG BEND ROAD P O BOX 758 NA GIBSONTON FL 33534					
	- ****					3. Date Incorporated or Qualified 09/16/1977	3a. Date of La 05/01/199	
2. Principal F	flace of Business	2a. Mai	28. Mailing Address			4. FEI Number	ן טאָט ן	Applied For
21		26				59-1766857		Not Applicable
Suite, Apt	#, etc.	Suit	e, Apt. #, etc.			5. Certificate of Status Desired		5 Additional e Required
City & Stal	le		& State			6. Election Campaign Financing		00 May Be
23		28				Trust Fund Contribution		ded to Fees
<i>Z</i> ip	Country	Zip		Count	ry	8. This corporation has liability for		er s. 199.032,
24	25 9. Name and Address of Cu	29 rent Registeres	1 Anent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
SEG	REST, V. ELWYN			8	1 Name	-,-,-		
6180 BIG BEND ROAD					2 Street Ac	ddress (P.O. Box Number is Not Acceptate	(مار	
GIBS	SONTON FL 33534					Jores (F.O. Dox Provider to Prot Production		
				8	3			
				8	4 City		85	Zip Code
11 Durguant	to the provisions of Spations 607	0500 and 607 1	EOS Elecido Statu	too the obe	wo named o	orporation submits this statement for the p	FL 65	no ite registered
office or	registered agent, or both, in the S	tate of Florida S	Such change was	authorized	by the corpo	ration's board of directors. I hereby accep	ot the appointmen	t as registered
SIGNATURE	ann amilia: with, and accept the o	Dilgations of, ool	CHOH 607.0505, FI	ionoa Stato	Co.			
SIGNATIONE	Signature, typed or printed name of registere			TE Registered A	er erutançãa tneg	quired when reinstating)	DATE	
12.	OFFICERS	AND DIRECTOR	RS DELETE	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIREC	
TITLE NAME	SEGREST, V. ELWYN		C bereie	1.1 T/(L) 1.2 NAM	1	*	Cila	inge 🖂 vooiliou 1
STREET ADDRESS	9917 BAY DRIVE				ET ADDRESS			
CITY-ST-7/P	GIBSONTON FL			1.4 DITY	1			
TITLE	D		DELETE	2.1 TITL			Cha	nge Addition
NAME	MILLER, F. DANIEL			2.2 NAM	E			į
STREET ADDRESS				2.3 STR	ET ADDRESS			
CITY-ST-7IP	BRADENTON FL	······································			'-\$T-ZIP			
THILE	D D D D DON		DELETE	3.1 Trīli	İ		☐ Cha	nge Addition
NAME CARLE ADDRESS	MILLER JR, C. DON 216-21ST STREET W.			3.2 NAM	1			Ĭ.
STREET ADDRESS CITY-ST-ZiP	BRADENTON FL			1	ET ADDRESS - ST- ZIP	·		\
TITLE			DELETE.	4.1 TITL			Cha	nge Addition
NAME				4. 2 NAA			"	
STHEET ADDRESS				4.3 STRE	ET ADDRESS			ł
Crity - St - ZIP				4.4 CITY	-ST-ZIP			
TITLE			☐ DELETE	5.1 T(7L)	1		☐ Cha	nge 🔲 Addition
NAME				5.2 NAM				į.
STREET ADDRESS					ET ADDRESS			ſ
CHTY-ST-ZIP TITLE			DELETE	5.4 CITY 6.1 TITL			Cha	nge Addition
NAMÉ	1		bear of barries	6.2 NAM			L., 0110	- may 1 100 011 021
STREET ADDRESS				1	ET ADDRESS			j

6.4 CITY-ST-ZIP 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

SIGNATURE:

4/29/87

(813)677-9196

FILED

May 08 1997 8:00am

Secretary of State