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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 696027

## **FILED** Apr 14 1997 8:00am Secretary of State

AMELIA NEALIT, INC.												
Principal Place of Business  PO BOX 3000  AMELIA ISLAND PLANTATION  AMELIA ISLAND FL 32035-1307			Mailing Address  PO BOX 3000  AMELIA ISLAND PLANTATION  AMELIA ISLAND FL 32035-3000									
US			U\$					3. Date Incorporated or Qualified 07/24/1981	( '	ite of Last R <b>17/1996</b>	leport	
2. Principal Place of Business			2a. Mailing Address					4, FEI Number	Applied For			
21			[26]					58-1473630	Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	Ŋ		Additional equired	
City & State			City & State					6. Election Campaign Financing			May Be	$\dashv$
23 Fernandina Beach, FL			28 Fernandina Beach, FL				Trust Fund Contribution			to Fees		
Zip	Cour	ntry	Z(p	Co	untry		••	8. This corporation has liability for i				-
24 32035			29 32035-3000	30	.,			Florida Statutes 🔀	Yes [	] No		
	9. Name and Add	ress of Current F	Registered Agent		81			10. Name and Address of New Reg	istered A	igent		
COMMANDER, CHARLES E, III						Name						
	INDEPENDENT SO		82 Street Ad			Addres	dress (P.O. Box Number is Not Acceptable)				-	
JAC	KSONVILLE FL				83				<del></del>			-
					03							
					84	City				<b>85</b> Zip	Code	٦
11. Pursuant office or a agent. La	to the provisions of Sc registered agent, or bo am familiar with, and ac	ections 607,0502 a oth, in the State of ecopt the obligation	ind 607.1508, Florida Stati Florida. Such change was ons of, Section 607.0505, F	utes, the authoriz lorida St	_ll above od by atules	e-named of the corp s.	corpo oratio	ration submits this statement for the pin's board of directors. I hereby accep	urpose of I the appo	changing it changing it cintment as	ls registered registered	
SIGNATURE												
12.	Signalure, lyped or printed is	one of registered agent a OFFICERS AND E				nt signature r	required	when reinstaling)	JAND	DIDEOTOR		ر ا-
TITLE	PD	OLLIOENS MND L	DEFETÉ	13	Inlee	1		ADDITIONS/CHANGES TO OFFIC		Change	Addition	ځ∐
NAME	COOPER, RICHAR	RD L			VAME	İ				LLS offerige		`
STREET ADDRESS	2760 TERMINAL T			1		ADDRESS						8
CITY-ST-ZIP	CLEVELAND OH				CITY-S							Į
TITLE	SD		DELETE	2.1	MLF					Change	Addition	Πζ
NAME	GUDBRANSON, R			2.2	NAME							
STREET ADDRESS	2750 TERMINAL T	OWER		2.3	S18E£1	ADDRESS						Ì
CITY-ST-ZIP	CLEVELAND OH	# FAME TO A		2. 4	CITY-S	1-20°						
TATLE	V		☐ DELETE	3.1						☐ Change	Addition	
NAME	BRAY, NORMAN	N 451747:01:	•		IAME							
STREET ADDRESS	AMELIA ISLAND P					ADDRESS						
CITY-ST-ZIP TITLE	AMELIA ISLAND F	L			CHY-S	1 - ZIP				☐ Change	Addition	
NAME	HEALAN, JACK B	.(D	L.J DITTE	4.1 7	NAME	j				— ousilis	FT MODERN	
STREET ADDRESS	AMEILA ISLAND P					ADDRESS						
CITY-ST-ZIP	AMELIA ISLAND F				HTY-SI							
TITLE	S	₹	DELETE	51		. • "		4 10°C 10°C 10°C 10°C 10°C 10°C 10°C 10°C		Change	Addition	$\dashv$
NAME	COMMANDER, CH	KARLES E.III			IAME							
STREET ADDRESS	200 LAURA STRE					ADDRESS						
CITY-ST-ZIP	JACKSONVILLE F				riy-Si							
TITLE			DELETÉ	6.1						Change	Addition	1
NAME				6.21	3MAI							
STREET ADDRESS				6.3 \$	TREE1.	ADDRESS						
CITY-ST-ZIP				6.4 (	31Y-S1	1 - Z(P						

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 of chapter for on an itachmost with an address.

Jack By He 133, 107.

April 3, 1997 904/261-6161