FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 758888

N, INC.											
Principal Place	of Business	Mailing Address					6071 3000 8158 5040 9850 1010	UC BIRDIN ALBUM DI	ANI BIBLE BIB	tri Bridita 1981	
1700 66TH ST. N. STE. #207 ST. PETERSBURG FL 33710			P.O. BOX 47068 ST. PETERSBURG FL 33743-7068 US				Date Incorporated or Qualified	3a. Date	of Last Re	noqe	
US							06/24/1981		/17/199		
2. Principal Pl 21	ace of Business	2a. Mailing /	2a. Mailing Address 26				4. FEI Number				
Suite, Apt	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A Fee Rei		
City & State	9	City & State				6. Election Campaign Financing	- i	\$5.00			
23		28	28				Trust Fund Contribution		Added to		
Zip	Country	Zip	——		,	This corporation has liability for intangible tax under				199.032,	
24	25	29		30			Florida Statutes Yes No				
	9. Name and Address of Curre	ent Registered Ag	t Registered Agent			10. Name and Address of New Registered Agent Name					
110115115	DEODA D			81	IVAITIE						
1700 66T	,DEBRAR					Address (P.O. Box Number is Not Acceptable)					
STE. #20											
	RSBURG FL 33710										
				84	'			FLI	85 Zip C		
11. Pursuant l	to the provisions of Sections 617.05	02 and 617.1508,	Florida Statutes	, the above	e-named	corpo	ation submits this statement for the p n's board of directors. I hereby accep	urpose of ch	anging its	registered	
agent. I a	egistered agent, or both, in the sta m familiar with, and accept the obli	gations of, Section	617.0503, Florid	da Statutes	7 the corp 3.	poratio	ns board of directors. I hereby accep	т ине върои	inen as	egistered	
SIGNATURE											
				Registered Age	legistered Agent signature required when reinstating) DATE 13. ADDIJIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
12.	PD OFFICERS A	IND DIRECTORS	DELETE	11 TITLE		10	sierat		Change	Addition	
NAME	STERBA, WILLIAM	_	12 N			Klawitck, WALKER		,			
STREET ADDRESS	19725 GULF BLVD., #302		1.3 5		ADDRESS						
CITY-ST-ZIP	INDIAN SHORES FL		1.40			195	9+ Charles Mo 63304				
TITLE	VPD		DELETE	2.1 TITLE		Ve	co- Parsident		Change	Addition	
NAME	SMITH, JERRY		2.2 NA		E Ro.		ss. Bernies			-	
STREET ADDRESS	19725 GULF BLVD., #403		:		2.3 STREET ADDRESS		185 Bulf Bled A	503			
CITY-ST-ZIP	INDIAN SHORES FL			2. 4 CITY-	ST-ZIP	Inc	lion Sheers, FL	7378S			
TITLE	SD	L	DELETE	3.1 TITLE			•	L.] Change	Addition	
NAME	NORRIS, MARGARET		I		3.2 NAME						
STREET ADDRESS	18450 GULF BLVD., #209				3.3 STREET ADDRESS						
CITY-ST-ZIP	INDIAN SHORES FL		DELETE	3.4 CITY-ST-ZIP				12.	Change	Addition	
TITLE	D DELETE GARITI, JOHN		T DETELE	4.2 NAME		1/6	ecotor Mothers	عا ا	1 change	L.J AGGIRON	
NAME STREET ADDRESS	404 HARPER ROAD		4.3 STREET ADDRESS		1110	and ON Alal	+40 V	1			
CITY-ST-ZIP	ALIQUIPPA PA		4.4 CITY-ST-ZIP		17	195 Gut Block of	3 878	سى:			
TITLE	TD DELETE		5.1 TITLE	5.1 TITLE		THE DECORES, I'M	1	Change	Addition		
NAME	ROSS, BERNICE		5.2			0.	Stenda, William 1		,		
STREET ADDRESS	19725 GULF BLVD. #503		4	5.3 STREET ADORESS		& Loke Macion	" Rd	•			
CITY - ST - ZIP	INDIAN SHORES FL 34635			5.4 CITY - S		W	inten Waren	12 3	388	4	
TITLE			DELETE	6.1 TITLE					Change	Addition	
NAME				6.2 NAME			•				
STREET ADDRESS				6.3 STREET	ADDRESS						

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

May 13 1997 8:00am

Secretary of State

Daytime Phone * 0051500