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 # **F27683**

(4)

	ENTAL SHALE CORPORA	ATION Mailing Addre							
494 N HARBOR CITY BLVD MELBOURNE FL 32935 MELBOURNE FL 32935-6858									
						3. Date Incorporated or Qualified 03/31/1981	3a. Date o	f Last Report 1 996	
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number 59-2089459		Applied For	
21		26	26					Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		8.75 Additional Fee Required	
City & Star	te	City & Stat	е			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Z(p)	Country 25	Ζιρ 29				8. This corporation has liability for injungible tax under s. 199.032, Florida Statutes Yes No			
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
WH	ittington, richard A			81	Name				
494 N. HARBOR CITY BLVD MELBOURNE FL 32935					Street Addre	ss (P.O. Box Numbor is Not Acceptable)			
				83					
				84	City		FL	5 Zip Code	
11. Pursuant office or agent. La	t to the provisions of Sections 607 registered agent, or both, in the S am familiar with, and accept the o	.05.02 and 607.1508, Flo State of Florida Such ch bligations of Section 60	orida Statutes, the a lange was authorize 17.0505, Florida Sta	ibovi ed by tutes	e-named corpo the corporations.	oration submits this statement for the pon's board of directors. I hereby accep	urpose of chi title appoint	anging its registered ment as registered	

3GH EARASID					****					
12.	Signature, typed or profeed have of registered agent and fit of OFFICERS AND DIRECT	apyteable (NOTE ORS	: Registered Agent signature	Agent signature required when reinstating) (JATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TILE	PD	DELETE	1.1 TITLE		☐ Change	Addition				
NAME	WHITTINGTON, RICHARD A		1.2 NAME			· .				
STEEFT ADORESS	494 N. HARBOR CITY BLVD		1.3 STREET ADDRESS							
Cilia - ST - ZiP	MELBOURNE, FL 00000		1.4 CITY-SI-ZIP							
THILE	AS	DELETE	2.1 TITLE		☐ Change	Addition				
NAME	WHITTINGTON, BARBARA C		2.2 NAME	•						
STREET ADDRESS	494 N. HARBOR CITY BLVD		2.3 STREET ADDRESS							
C-TY - ST - ZIP	MELBOURNE, FL 00000		2. 4 CITY-ST-ZIP	 	· '					
Thire	VPD	DELETE.	3.1 TITLE		Change	Addition				
NAME	COUNTS, RICHARD A.		3.2 NAME							
STREET ADDRESS	494 N. HARBOR CITY BLVD.		3.3 STREET ADDRESS		•					
CITY - S1 - ZIP	MELBOURNE FL		3.4. CHY-ST-ZIP							
TIFLE	i 1	DELETE	41 TITLE		Change	☐ Addition				
NAME	•		4 2 NAME			Ì				
STREET ADDRESS			4.3 STREET ADDRESS	#						
CHTY - S1 - ZIP			4.4 CITY-ST-ZIP							
1815	,	DELETE	51 TITLE		Change	Addition				
NAME			5.2 NAMÉ							
STREET ADDRESS			5.3 STREET ADDRESS			ĺ				
CITY - S1 - 7.P			5.4 CITY - ST - 7IP							
TitleF		DELETE	6.1 TITLE		Change	Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS	•		İ				
CITY-SI-ZiP			6.4 CITY-ST-ZIP	·						

14. Ldo 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature on Frinted NAME OF SIGNATURE ON DIRECTOR

2-19-97

407-254-4054

FILED

Feb 24 1997 8:00am

Secretary of State

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