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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT #**

(0)

Principal Place 431-433 EAST JACKSONVILLUS	21\$T	Mailing Ac	Mailing Address 3266 GLENDYNE DR E. JACKSONVILLE FL 32216-7157							
							3. Date Incorporated or Qualified 10/08/1985	1	Date of Last 3 3/06/199	
2. Principal Pla	ace of Business	2a. Mailing	Address				4. FEI Number			Applied For
21		26	•				59-2601660		├	Not Applicable
Suite, Apt. #	t, etc.		Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired			Additional
City & State		27 City &	State				6. Election Campaign Financing			Required
23		28					Trust Fund Contribution			0 May Be Jito Fees
Zip	Country	Zip		Coun	try		8. This corporation has liability for			
24	25	29		30					□ No	
	9. Name and Address of Curre	ent Registered A	gent		31	Name	10. Name and Address of New Re	gistere	1 Agent	
FIELDS, HAROLD JEROME 3266 GLENDYNE DRIVE EAST										
JACKSONVILLE FL 32216				Įε	32	Street Addr	ress (P.O. Box Number is Not Acceptable)			
				8	13		· · · · · · · · · · · · · · · · · · ·			
				Ε	14	City			85 Zip	Code
	····					ŕ	oration submits this statement for the poor's board of directors. I hereby accept	FI	L	
SIGNATURE			le (NC				ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AN		
THILE	DP		DELETE	1,1 TITU	E				☐ Change	☐ Addition
NAME	FIELDS, HAROLD JEROME 3266 GLENDYNE DR E.			1.2 NAM						
STREET ADDRESS : CITY-ST-ZIP	JACKSONVILLE FL			1.3 STRE 1.4 CITY		ADDRESS				
TIFLE	D		DELETE	2.1 TITL		- ZIF			Change	Addition
NAME	FIELDS, YVONNE B.			2 2 NAM	1E					
STREET ADDRESS	3268 GELNDYNE DR E			2 3 STR	EFT A	ADDRES\$				
CITY-ST-ZIP	JACKSONVILLE FL		DELETE	2 4 CITY 3 1 TITE		T - ZIP			Change	Addition
TITLE NAME			☐ Deterie	3 1 111£	_				☐ Change	Addition
SIREFI ADDRESS						ADDRESS				
CITY - ST - ZIP				3.4. GITY		į				
TITLE			DELETE	4.1 TITLI	E				Change	Addition
NAME				4. 2 NAN	ΛE					
S!REET ADDRESS						ADDRESS				
CITY+ST-ZIP TITLE			DELETE	4.4 CITY 5.1 TITL		- ZIP			Change	Addition
NAME			OLCCIC	5.1 NAM		l			Change	Monthou
STREET ADDRESS				I.		ADDRESS				
CITY-ST-7IP				5.4 CITY	- ST	- ZIP				
1/11/			DELETE	6.1 TiTL	F				Change	Addition
NAME				6.2 NAM	PE.					
STREET ADDRESS						ADDRESS				
C:1Y-SI-ZIP 14. Ldo bereb	v certify that the information supplies	and with this filing	does not alla	64 CITY			in Section 119.07(3)(i), Florida Statute	s Hurth	or cortify the	al the
information I am an off	i indicated on this annual report or	r supplemental an or the receiver or	nual report is trustee empo	true and ac wered to ex	ecu	rate and that	my signature shall have the same legs tas required by Chapter 607, Florida S	al effect Statutes;	as if made ui and that my	inder oath; that name