FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

H84515 **DOCUMENT #**

(6)

HUNT, COOK, RIGGS, MEHR & MILLER, P.A.

Principal Place o	of Business	Mailing Address 2200 CORPORATE BLV	/D NW		
SUITE 401 BOCA RATON FL 33431		SUITE 401 BOCA RATON FL 33431		3. Date Incorporated or Qualified 11/07/1985	3a. Date of Last Report 05/01/1995
2. Principal Plac	ce o' Business	2a. Mailing Address		4. FEI Number 59-2609938	Applied For Not Applicable
Suite, Apt. #.	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		City & State	<u> </u>	6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
23 Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30	1.0.744 0.000.00	es No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New	Hegistered Agent
HCRM C	ORP DRPORATE BLVD NW			Idress (P.O. Box Number is Not Accept	able)
SUITE 40			83		
	ATON FL 33431		84 City		85 Zip Code
İ				the state was for the	FL 5
	o the provisions of Sections 607.0502 ad agent, or both, in the State of Floric h, and accept the obligations of, Secti			oard of directors. I hereby accept the ap	ourpose of changing its registered office oppointment as registered agent. I am
SIGNATURE _	Signa ure, typed or printed name of registered agent	and title if a policable.	IOTE: Registered Agent signature rec	uired when reinstating)	DATE
12.	OFFICERS AN		13.		FFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1. 1 THILE	Vice President	· Change X Addition
NAME	HUNT, ROBERT J.		1.2 NAME		
STHEET ADDRESS	9 TAHOE LANE		1.3 STREET ADDRESS		
CITY - ST - ZIP	SEA RANCH LAKES FL	C DECETE	1.4 CITY - ST - ZIP 2 1 TITLE	N. D. J. Jane	☐ Change ☑ Addition
TITLE	D COOK TOSEBH B	DEFELE	22 NAME	Vice President	R
NAME	COOK, JOSEPH R. 7100 W CYPRESS HEAD DR	•	2.3 STREET ADDRESS		
STREET ADDRESS	PARKLAND FL		2.4 City-St-ZiP		
CITY-ST-ZIP	PARIODIOTE	☐ DELETE	3.1 TITLE		Change Addition
TITLE			32 NAME		
NAME CTREET ANDRESS			3.3 STREET ADDRESS		
STREET ADDRESS			3 4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE	D	☐ DELETE	4. 1 TITLE	Secretary	Change K Addition
NAME	MEHR, RYNA E.		4.2 NAME	-	
STREET ADDRESS	5701 NW 23RD AVE		4.3 STREET ADDRESS		
CHY-ST-ZIP	BOCA RATON FL		4.4 CITY - ST - ZIP		Ohann Wil Addition
TITLE	D	☐ DELETE	5. 1 TITLE	Vice President	☐ Change K Addition
NAME	MILLER, LAWRENCE J		52 NAME		
STREET ADDRESS	4177 WOODFIELD BLVD		5.3 STREET ADDRESS		
CITY - ST - ZIP	BOCA RATON FL		5.4 CITY - ST - ZIP		Change Addition
TITLE		DELETE	6. 1 TITLE		
NAME			62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - \$1 - 712	1		6.4 CITY - ST - ZIP		to Calcula Flying Cash dog 1 Suther

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE IND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 29, 1996

(407) 997-9223

Daytime Phone #

CR2E034 (12/95)