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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Mar 13 1997 8:00am Secretary of State

CORPOR ANNUAL F	CORPORATION NNUAL REPORT 1997 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State DIVISION OF CORPORATIONS		Secretary of State			
and the state of t	NT # K77165 OPMENT CORPORATI				: * 2011)	e ren alor
Principal Place of Bu	rsiness	Mailing Address	<u> </u>			
TO WILLIAM S. WILKINS 1801 WEST COLONIAL DR 1801 WEST COLONIAL DR ORLANDO FL 32806 ORLANDO FL 32806			1			
VS :		US		3. Date Incorporated or Qualified 04/03/1989	3a. Date of Last R 02/01/1996	eport
2. Principal Place of	Business	28. Mailing Address		4. FEI Number	Ap	plied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2936957 5. Certificate of Status Desired	\$8.75	t Applica Additional
2 City & State		City & State			Fee Re	<u> </u>
3		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip 4	Country 25	Zip 29	Country 30	8. This corporation has fiability for Florida Statutes	intangible tax under s. Yes No	199.032
	Name and Address of Curren		81 Name	10. Name and Address of New Re	gistered Agent	
WILKINS, WILLIAM S. 1801 WEST COLONIAL DR ORLANDO FL 32804		82 Street Add	ress (P.O. Box Number is Not Acceptal	ble)		
			[83]			
			<u> </u>		·····	
11. Pursuant to the office or register	provisions of Sections 607.050, ed agent, or both, in the State	2 and 607.1508, Florida Slatu of Florida, Such change was	es, the above-named corporal c	poration submits this statement for the l		Code s register registere
11. Pursuant to the poffice or register agent. I am fami	e. lyped or printed name of registered age	nt and title if applicable (NO	es, the above-named corporate by the corporate Statutes.		DUIPOSE of changing it pt the appointment as	s register registere
11. Pursuant to the politice or register agent. I am familisiGNATURE Signature 12.		nt and title if applicable (NO	es, the above-named corp authorized by the corporal orida Statutes.		DUIPOSE of changing it pt the appointment as	s registere registere
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rmonnation indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under or lam 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 a statischment with an address.

SIGNATURE: