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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT #	N18045	

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SURPLANCE STATE 25	<u> </u>			h		tate of Lest Report 02/17/1995
Coty & State 27	21		<u> </u>		4. FEI Number 52-1426078	
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App Country Zip So So So So So So So S	City & Stat	re				\$5.00 May Be
9. Name and Address of Current Registered Agent GIESER, DONALD E. 887 OS E LITTLE CLUB WAY, NO. TEOUESTA 33469 82 Street Address (P.O. Box Number is Not Acceptable) 84 Oity FL 85 Zp Code 65 Oity FL 85 Zp Code 66 Oity FL 85 Zp Code 71. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office and statutes. SIGNATURE 12. OFFICEIS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICEIS AND DIRECTORS IN 12 14. Intel 15. ADDITIONS/CHANGES TO OFFICEIS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICEIS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICEIS IN 12 15. TO 79th Terrace N. 15. ON ORDINATOR IN 12 15. TO 79th Terrace N. 15. ON ORDINATOR IN 12 15. ON ORDINATOR	Zip 24	— ·		·	8. This corporation has liability for intangible t	ax under s. 199.032,
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TEOUESTA 33469 88 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am for accept the obligations of, Section 517.0502, Proficed Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. TITLE D. SOME SCHWENK J. MICHAEL 15. TITLE D. SOME SCHWENK J. MICHAEL 15. TITLE D. SOME DIRECTORS IN 12. 16. TITLE D. SOME SCHWENK J. MICHAEL 15. TO 79th Terrace N. 16. City St. Zip 16. City St. Zip 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. TITLE D. SOME SCHWENK J. MICHAEL 15. TO 79th Terrace N. 16. City St. Zip 16. City St. Zip 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. TITLE D. SOME SCHWENK J. MICHAEL 15. TO 79th Terrace N. 16. City St. Zip 16. City St. Zip 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. TITLE D. SOME TO THE OWN T				82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
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12.		th, and accept the obligations of, Sect	ion 617.0503, Florida Statute	is.	To or directors. Thereby accept the appointment as	registered agent.) am
DA				OTE: Registered Agent signature require	ed when reinstating) DATE	
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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 attrictment with an address.

NORENE A. GIESER, SECRETARY FEB. 21, 1996

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

NORENE A. GIESER, SECRETARY FEB. 21, 1996

Date Date AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR SIGNATURE: 1