CORPORATION ANNUAL REPORT 1996	Sandra Secret	ARTMENT OF STATE B. Mortham lary of State CORPORATIONS		
DOCUMENT # N 1 9	068			
Peoples Net	work Inc			
Principal Place of Business 3 River Street White Springs	. • ~ ~ ~	"F"		
Florida 32096 2. Principal Place of Business	Florida	rings 32096-0280	3. Date Incorporated or Qualified 02-03-87	3a. Date of Last Report
Suite, Apt. #. etc.	2a. Mailing Address 26		4. FEI Number 59-27764	8 7 Applied For Not Applicable
City & State	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
3]	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Country 25 9. Name and Address of Cur	Z/p 29	Country 30	This corporation has liability for in Florida Statutes	ntangible tax under s. 199,032.
Harder, Charle	S Eduard.	81 Name	10. Name and Address of New Reg	istered Agent
3 River Street	Box 413	82 Street Addres	ss (P.O. Box Number is Not Acceptable	e)
White Spring	s, F1 32096			
		84 City		FI 85 Zip Code
11. Pursuant to the provisions of Sections 617.0	0502 and 617.1508. Florida Statute	es the above named cores	ration of Early Mills	<u> FL </u>
Pursuant to the provisions of Sections 617.0 office or registered agent, or both, in the Stagent I am familiar with, and accept the observations.	0502 and 617.1508, Florida Statute ate of Florida, Such change was a oligations of, Section 617.0503, Flo	es, the above-named corporation authorized by the corporation frida Statutes.	ration submits this statement for the pui n's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE Signature: typed or printed name of registered	agent and title if applicable (NOTE	rida Statutes. Registered Agent signature required	when reinstating)	rpose of changing its registered the appointment as registered
SIGNATURE Signature typed or pricted name of registered	gations of, Section 617.0503, Flo	rida Statutes.	accept	rpose of changing its registered the appointment as registered DATE RS AND DIRECTORS IN 12
SIGNATURE Signature typed or pricted name of registered OFFICERS A ILLE P/T/D AME. Position	agent and title if applicable (NOTE AND DIRECTORS DELETE	Registered Agent signature required 13. 11 TITLE 1.2 NAME	when reinstating)	rpose of changing its registered the appointment as registered
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