FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

| Mailing Address 5726 CORTEZ RD. WEST SUITE #162 |
|--|
| BRADENTON FL 34210 |
| 2a. Mailing Address |
| Suite, Apt. #, etc. |
| 27 |
| City & State |
| |

| BRADENTON | FL 34209 | | BRADENION FL 34211 | U | | | | | | | | |
|----------------------|--|------------|-----------------------|-----------------|------------------|--------------|---------------|---|-----------------------------------|-----------------------------------|-----------------|--|
| U\$ | | | | | | | | 3. Date Incorporated or Qualified 06/13/1987 | | Date of Last Report 05/01/1995 | | |
| 2. Principal Pla | ice of Business | 28 | 2a. Mailing Address | | | | | 4. FEI Number | | A | Applied For | |
| 21 | | 26 | | | | | | 65-0012680 | | | lot Applicable | |
| Suite, Apt. # | , etc. | - L | Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | \$ | | Additional | |
| 22 | | 27 | | | | | | | | Fee F | Required | |
| Crty & State | | <u> </u> | City & State | | | | | 6. Election Campaign Financing | 1 1 | • | May Be | |
| 23 | | 28 | | | | | | Trust Fund Contribution | | | to Fees | |
| Zip | Country | <u> </u> | Zip 1 | <u> </u> | untry | ' | | 8. This corporation has liability for in | | der s. | 199.032, | |
| 24 | 25 | 29 | | 30 | Τ | | | Florida Statutes 10. Name and Address of New Re | Yes No | nt | | |
| | 9. Name and Address of Curr | ent veði | stereo Agent | | 81 | ΤŃ | lame | 10. Name and Address of flow re | gistored Age | - | | |
| | | | | | | '' | IBITIC . | | | | | |
| KROEGER, RONALD H. | | | | | 82 Street Addres | | | dress (P.O. Box Number is Not Acceptable | e) | | | |
| | th street west | | | | 83 | ├ | | | | | | |
| Braden | ITON FL 34209 | | | | 63 | | | | | | | |
| | | | | | 84 | C | Dity | | F. 8 | 5 Zip | Code | |
| | | | | | <u> </u> | L | | | FL | | anistand office | |
| or register | o the provisions of Sections 617.05 ed agent, or both, in the State of Fi h, and accept the obligations of, Se | orida. Sud | ch change was authori | ized by the | ove-r corp | narr oora | tion's boa | oration submits this statement for the purp ard of directors. I hereby accept the appo | ose or changir intment as regi | ig its re stered | agent. I am | |
| SIGNATURE | | | | IOTS Date Asset | 4 | | | red when reinstating) | DATE | | | |
| 12. | Signature, typed or printed name of registered as OFFICERS A | | | 13 | | nt sig | y ature requi | ADDITIONS/CHANGES TO OFFI | | ₹E.CTO | RS IN 12 | |
| TITLE | PD | | DELETE | | TITLE | | | | | hange | Addition | |
| NAME | CANTLAY, GORDON | | — | | NAME | | | | | | _ | |
| STREET ADDRESS | 4460 IRONWOOD ICR, 408 | PAD. | | | | T ADE | DRESS | | | | | |
| | BRADENTON FL |)AU | | | DITY-S | | - 1 | | | | | |
| CITY-ST-ZIP THILE | DINDENTON FL | - | DELETE | | TITLE | 31-2 | - | | C | hange | Addition | |
| NAME | AMENT, DOROTHY | | | | NAME | | | | | - | | |
| ii | 4440 IRONWOOD CRICLE | 501D | | | | | DRESS | | | | | |
| STREET ADDRESS | BRADENTON FL | , 5010 | | | CITY - | | | | | | | |
| CITY-ST-ZIP TITLE | SD | | DELETE | | TITLE | 31-1 | 111 | | ПС | hange | Addition | |
| NAME | RICHEY, THOMAS | | | | NAME | | | | | | _ | |
| STREET ADDRESS | 4240 IRONWOOD CR. 401 | .ΔΔ. | | | | | DRESS | | | | | |
| | BRADENTON FL | -743 | | | CITY- | | | | | | | |
| CITY-ST-ZIP TITLE | n Dradenion i | | DELETE | | TITLE | 31- | - | | | hange | Addition | |
| NAME | ALLEN, BETTY | | | 1 | NAME | : | | | | • | — | |
| | 4210 IRONWOOD CIR #10 | 16. I | | | | | DRESS | | | | | |
| STREET ADDRESS | BRADENTON FL | JU-J | | | oinee City-: | | | | | | | |
| CITY-ST-ZIP | | | DELETE | | TITLE | <i>ا-اد</i> | 'it. | | Fic | hange | ☐ Addition | |
| TITLE | TD DONALD | | LJbeent | | NAME | | | | | | | |
| NAME | ROCK, DONALD | #506 C | • | | | | NODECC | | | | | |
| STREET ADDRESS | 4080 IRONWOOD CIRCLE | , #3UO-U | J | | | | ORESS | | | | | |
| CITY-ST-ZIP | BRADENTON FL | | DELETE | | CITY- | SI-Z | | VO | | hange | Addition | |
| TITLE | VD | | [♣] nere ie | | | | | AUAU AZANAAD | | a.go | | |
| NAME | ROBINSON, PAUL | **** | 5 | | NAME | | | 4480 IRONWOOD CIR, 3 | 15A | | | |
| STREET ADDRESS | 4200 IRONWOOD CIRCLE | , #105-l | 5 | 6.3 | STREE | T AD | DRESS 4 | דקטט ואטאון טייט אייטאון | a | | | |

City-St-ZiP BRADENTON FL

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE (SIGNATURE OF SIGNING OFFICE OF OR DIRECTOR

CR2E037 (12/95)