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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED
May 17, 1999 8:00 am
Secretary of State
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| - | Place of Business | | 2a. Mailing | Address | | | 3. Date Incom | porated or Qualifed | | | · . |
| Suite, Apt | t # etc | | 26 | | | | 10/12/8 | | ļ | | |
| 2] | r, etc. | } | _ | pt. #, etc. | | | 4. FEI Number | | | | pplied For |
| City & Sta | ite | | 27 City & S | State | | | 59-2982 | 262 | | | of Applicab |
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| Zip 1 | Country | | Zip | | Count | ry | — ———— | | | | equired |
| <u>'</u> | 9. Name and Addres | Se of Current 5 | 29 | | 30 | | Trust Fund (| mpaign Financing Contribution | | \$5.00 | May Be to Fees |
| | Audies | o current Re | yistered Ag | ent | | 11 No. | 10. Name and | Address of Now 5 | Registered Aq | gent | N FEES |
| W | Villiam J. N | lasser | | | Ľ | <u>'</u> Nameja | mes M. No | lan | | | |
| 2697B Sunset Point Rd. | | | | 82 | 2 Street Ad | dress (P.O. Box Num 38 East L | ber is Not Accepta | iþíg) | | | |
| C | Clearwater, | FL 337 | | | 83 | 3 34 | 38 East L | ake Rd. | #22 | · | |
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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 CALATILDE.

4/28/