

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **N48528** (6)
1. Corporation Name
STUART FLYRODDERS, INC.



Principal Place of Business 3585 SE ST. LUCIE BLVD. STUART FL 34997	Mailing Address 3585 SE ST. LUCIE BLVD. STUART FL 34997-5439
---	--

3. Date Incorporated or Qualified 04/20/1992	3a. Date of Last Report 01/11/1996
4. FEI Number 65-0415905	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
---	--

9. Name and Address of Current Registered Agent
**DEVITO, RICHARD D
3585 SE ST. LUCIE BLVD.
STUART FL 34997**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. 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 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLINEX, SAM	1.2 NAME	Tom Walker
STREET ADDRESS	6254 SE THOMAS DR.	1.3 STREET ADDRESS	686 S.W. Terrace
CITY-ST-ZIP	STUART FL	1.4 CITY-ST-ZIP	Palm City FL 34990
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, DON	2.2 NAME	
STREET ADDRESS	10600 SO OCEAN DR. #901	2.3 STREET ADDRESS	
CITY-ST-ZIP	JENSEN BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Steve Peterson, Tr. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOMEISSLER, DOUG	3.2 NAME	3286 S.W. Perimeter Rd
STREET ADDRESS	1108 NE QUINN PLACE	3.3 STREET ADDRESS	Palm City FL 34990
CITY-ST-ZIP	JENSEN BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Mike Holiday Sec <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, DAVE	4.2 NAME	83 Las Vegas Dr
STREET ADDRESS	1225 PINE LAKE	4.3 STREET ADDRESS	Jensen Beach FL 34997
CITY-ST-ZIP	STUART FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVITO, RICH	5.2 NAME	
STREET ADDRESS	1700 N. FEDERAL HWY.	5.3 STREET ADDRESS	
CITY-ST-ZIP	STUART FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E037 (9/96)