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Feb 17 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 # N51159 (4)

1. Corporation Name
R/C FLIERS OF VENICE, INC.



Principal Place of Business Mailing Address
P.O. BOX 3171 VENICE FL 34293 P.O. BOX 3171 VENICE FL 34293-0123

3. Date Incorporated or Qualified 10/05/1992 3a. Date of Last Report 02/15/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

4. FEI Number 65-0385887 Applied For Not Applicable

22 City & State 27 City & State

5. Certificate of Status Desired XX \$8.75 Additional Fee Required

23 Zip 25 Country 28 Zip 30 Country

6. Election Campaign Financing Trust Fund Contribution [] \$5.00 May Be Added to Fees

24 Zip 25 Country 28 Zip 30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [] Yes XX No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TURNER, PETER
310 TREASURE ROAD
VENICE FL 34293

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 PETER TURNER Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FEB. 11, 1997

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DC MUMMA, WARREN M 5457 TALBROOK RD NORTH PORT FL
V GANDORF, EDWARD C 373 ROSELING CIR VENICE FL
S WILDER, ALLEN 1340 DEVON ROAD VENICE FL
T SCHRADER, HERBERT 411 BAYNARD DR VENICE FL
D OBESHAW, KEN 308 CRANE ROAD ENGLEWOOD FL
PD TURNER, PETER 310 TREASURE RD VENICE FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE V GURWACZ, CHESTER J 529 Dover Dr. S. Englewood, FL 34223
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 567 Laurel Cherry Lane
3.4 CITY - ST - ZIP
4.1 TITLE T ALFONSO, FRANK 265 Royal Oak Way VENICE, FL., 34292
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE P
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE: PETER TURNER Signature, typed or printed name of signing officer or director DATE FEB. 11, 1997 941-493-3346 Daytime Phone # 0084702

CR2E037 (9/96)