FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 14 1997 8:00am Secretary of State

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Suite, Apt #, Cit. Suite, Apt #, etc.						12/05/1994		
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City & State Country City & State Ci		# 610			S. Cleverano	we 00-0038088	_ \$0.7	Not Applicable
Zip	22		27			· · · · · · · · · · · · · · · · · · ·	Fee	Required
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. Forting the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation automits this statement for the purpose of changing its registered agent or body, in the statement for the purpose of changing its registered agent agent at the far-share with age agreet the agent agent at the far-share with age agreet the agent		0	28	TO MYE	res	, , ,		
9. Name and Address of Current Registered Agent SHACKELFORD, JON S. 15186 PALM ISLE DRIVE FORT MYERS FL 33919 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33919 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33919 86 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or body, in the state of Florida, 5th change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and advantage of the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or body, in the state of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or body, in the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or body, in the state of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or body, in the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or body, in the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or body, in the state of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or body, in the state of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or body, in the state of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or body, in the state of Florida State of Florida State of Florida State of Florida State of Flor			f1	<i>ਮ</i>				er s. 199.032,
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12.	agent. La	registored agent or both, in the implementation agreement the implementation agreement the interest agent agreement the interest agent agreement a	ne deligations of, se		aumorized by the corporal orida Statutes.	(IDX) is board or directors. I hereby acce	pt the appointment ?c7	as registered
12.		Stringly Party and the epities	istered agent and title Noor		E: Registered Agent signature regul	red when reinstating)	DATE	
NAME SHACKELFORD, JON S. 12 NAME 13 STREET ADDRESS	12.		ERS AND LIRECTOF		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	
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14. I do hereby certily 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 oat I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 iffshanged an attachgain with an address.	14. I do herel informatic I am an o	by certily that the information in indicated on this annual re officer or director of the corpo	supplied with this fit port or supplementa ration or the receive	ing does not quali il annual report is t r or trustee impov	fy for the exemption states true and accurate and that vered to execute this repo	d in Section 119.07(3)(i), Florida Statut t my signature shall have the same leg rt as required by Chapter 607, Florida	es. I further certify t al effect as if made Statutes; and that n	hat the under oath; tha ny name

SIGNATURE:

MING OFFICER OR DIRECTOR PROBLEM + CEO

4-9-97 (94) 433-1974 Daytine Prone #