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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

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Jun 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000020614 (9)

QUINLAN & SMITH, P.A.

Principal Place of Business Mailing Address											1		88 		
1401 MANATEE AVENUE, W. 1401 MANATEE AVENUE, W.							N.								
SUITE 820 SUITE 820							_								
BRADENTON FL 34205 BRADENTON FL 34205-6702												T			
											 Date Incorporated or Qualified 03/06/1996 	3a. Da	ate of Last R	leport	
2. Principal Place of Business					2a. Mailing Address						4. FEI Number		Λr	oplied For	
21				26	26					65-0648670 Not Applicable			ot Applicable		
Suite, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75		
22					27								· · · · · · · · · · · · · · · · · · ·	equired	
City & State					City & State						6. Election Campaign Financing \$5.00 May Be				
23	Zip Country			28	28			untry			Trust Fund Contribution	Ц	Added		
_	ΣIÞ	25						Addrill y			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24 25 29 29 9. Name and Address of Current Registered Agent							30					Name and Address of New Registered Agent			
SMITH, GILBERT A JR.									Name	•	TO. THE STATE OF THE PARTY OF T	gistorea	- your		
1401 MANATEE AVENUE, W. SUITE 920								82	Street A	Addres	s (P.O. Box Number is Not Acceptab	ıle)			
BRADENTON FL 34205								83				····			
	Unin	DENION I	L OTEUU												
	1.	•					;	84	City			FL	85 Zip	Code	
11.	Pursuant	to the provis	ions of Sections 6	07.0502 and	607.1508	Florida Statut	es, the al	DOVE	-named (corpor	ation submits this statement for the p	urpose o	changing it	s registered	
	office or t	registered ag	ent, or both, in the th, and accept the	e State of Flo	orida. Such	change was a	authorize	d by	the corp	poration	n's board of directors. I hereby accep	t the app	ointment as	registered	
	•	Pri i i i i i i i i i i i i i i i i i i	in, and accopt the	o Quilgations	or, occitor	1 007.0303, 1 10	zida otat	uico							
SIC	SNATURE	Signature, typed	or printed name of regis	lered agent and t	itle il applicable	n (NO1	E: Hogistore:	d Age	nt signature i	required	when reinstating)	DATE	·····		
12.			OFFICE	RS AND DIR			13.				ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12	
TITL	E	D			į	DELETE	1.1 (0	1LE					☐ Change	☐ Addition	
NAME SMITH, GILBERT A JR.							1.2 NAME								
STREET ADDRESS 1401 MANATEE AVENUE, W., SUITE 920							1.3 \$1	1.3 STREET ADDRESS							
CITY	-ST-ZIP		ON FL 34205				1.4 CI	TY-S1	1-ZIP						
TITL	E	D				DELETE	2.1 10	TLE					☐ Change	Addition	
NAM	AME QUINLAN, JOHN V							2.2 NAME							
STREET ADDRESS 1401 MANATEE AVENUE, W., SU					ATE 920 23			2.3 STREET ADDRESS							
	-ST-ZIP	BRADENT	ON FL 34205			C locus	2.4 C		I - ZIP						
TITL		D				☐ DELETE	3.1 TI		1				☐ Change	Addition	
NAN		HAMRIC	CK, MICH	AEL M.	,		3.2 N/		1						
	EET ADDRESS	1401_	MANATEE TON, FL	AVE, y	ر, S:	rE.920			ADDRESS						
		BRADEI	TON, FL	342(DELETE	3.4. C		1-2IP				T 7 01	1 4 1 100	
TITL		ש				DELETE	4.1 Ti						Change	L Addition	
NAM			, PHILI			^^^	4. 2 N								
			ANATEE :			TE.920			ADDRESS						
-		BRADE	TON, FL	3420	15	DELETE	4.4 CF		- ZIP				Channe	Addition	
TITL					Į.	□ DETE • C	5.1 16						Change	Addition	
NAM							5.2 NA								
	ET ADDRESS						- 1		ADDRESS						
	- ST - ZIP	* 777				DELETE	5.4 CI		- ZIP				Change	Addition	
TITL		A.			ı	ש אנננוג	6.1 1(1						Change	III ACCILIDON	
NAM							6.2 NA	KML.							

I do hereby certify that the informatic usupplied with this rilling 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 aport or supplemental annual report is frue 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 configuraceiver or frustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if claimed, or priso of the configuration of the co