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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000096470 (4)**

FILED Apr 27 1998 8:00am Secretary of State

	ERRED MANAGING AG	aenut, inu.										
Principal Plac	e of Business	Mailing Add	iress				1 1001100		amail Marte Ar	Acc. 8 8 118 12	**** *****	(WO)+ WO!! 100!
810 THOMASVILLE ROAD 810 THOMASVILLE ROAD												
TALLAHASSEE FL 32303 TALLAHASSEE FL 32303							DO NOT WRITE IN THIS SPACE					
1						3	Date Incor	porated or C	Dualified			
							11/12/	<u> 1997</u>				
2. Principal P	lace of Business	2a. Mailing /	Address	-		4	FEI Numbi					Applied For
21		26					<u>59</u>	3480	242	-		lot Applicable
Suite, Apt.	. #, elc.	<u> </u>	ot. #, etc.			5	Certificate	of Status De	esired			Additional Required
City & Stat	16	27 City & St	tate				Election C	ompaign Fin	ancina			May Be
23		28				۱°		Contribution	-			ito Fees
Zip	Country	Zip	I_	Country	, 	8	. This corpo			id the cu		
24	25	29	3	ю				roperty Tax				□ No
	9. Name and Address of	f Current Registered Age	ent			10	. Name and	Address o	f New Re	gistered	Agent	
	DX, RICHARD N JR			81	Name							
	1 N GADSDEN STREET			82	Street	Address (P.O. Box Nu	mber is Not	Acceptat	ole)		
T#	ALLAHASSEE FL 32301			83			· · · · · · · · · · · · · · · · · · ·			··· <u>-</u>		
				89								
				84	City					FL	85 Zip	Code
11 Dureuspt	to the provisions of Castions	607 0502 and 607 1509 E	Elorida Ctatutos	the above	nemod	corporati	on submits t	bio etatemen	t for the r		ef changing	ite registered
office or i	to the provisions of Sections registered agent, or both, in the am familiar with, and accept the	he State of Florida, Such of	change was au	thorized by	the corp	poration's	board of dire	ectors. I here	by accep	ot the ap	pointment a	s registered
											, -	
	an ianilla with and accept to	ne obligations of, Section	607.0505, Flori	oa Statutes	š.						,	
agent. I a SIGNATURE								,·				
	Signature, typed or printed name of reg			Registered Age			n reinstating)	/CHANGES		DATE		
SIGNATURE	Signature, typod or printed name of reg OFFIC	pistered agent and title if applicable ERS AND DIRECTORS		Registered Age			n reinstating)			DATE		PRS IN 12
SIGNATURE	Signature, typed or printed name of reg OFFICI D RICE, C. FREDERICK	pritried agent and title if applicable ERS AND DIRECTORS	(NOTE: I	Registered Age			n reinstating)			DATE	D DIRECTO	PRS IN 12
SIGNATURE 12. Title	Signature, typed or printed name of ray OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY L	pritried agent and title if applicable ERS AND DIRECTORS	(NOTE: I	Registered Age 13. 1.1 TITLE	int signature		n reinstating)			DATE	D DIRECTO	PRS IN 12
SIGNATURE 12. TITLE NAME	OFFIC D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119	pritered agent and title if applicable ERS AND DIRECTORS B	(NOTÉ: I	13. 1.1 TITLE 1.2 NAME	nt eignature		n reinstating)			DATE	D DIRECTO	PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY U NAPLES FL 34119	pritered agent and title if applicable ERS AND DIRECTORS B	(NOTE: I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2 1 TITLE	nt eignature		n reinstating)			DATE	D DIRECTO	PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY U NAPLES FL 34119 D SHAW, ROBERT T	pritered agent and title if applicable ERS AND DIRECTORS ANE	(NOTÉ: I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	ADDRESS		n reinstating)			DATE	D DIRECTO	PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY ST - ZIP TITLE NAME STREET ADDRESS	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA	pritered agent and title if applicable ERS AND DIRECTORS ANE	(NOTÉ: I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS T-ZIP		n reinstating)			DATE	D DIRECTO	PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293	unitered agent and title if applicable ERS AND DIRECTORS B ANE [2]	(NOTE: I	13. 1.1 TIFLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TIFLE 2.2 NAME 2.3 STREET 2.4 CITY-S	ADDRESS T-ZIP		n reinstating)			DATE	D DIRECTO	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D	pritered agent and title if applicable ERS AND DIRECTORS E ANE L L L L L L L L L L L L L	(NOTÉ: I	13. 1.1 TIFLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TIFLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TIFLE	ADDRESS T-ZIP		n reinstating)			DATE	D DIRECTO	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME MAME	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES	pritered agent and title if applicable ERS AND DIRECTORS E ANE L L L L L L L L L L L L L	(NOTE: I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP		n reinstating)			DATE	D DIRECTO	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFIC D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 580 S OCEAN BLVD	enstered agent and title if applicable ERS AND DIRECTORS B ANE LE L	(NOTE: I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS		n reinstating)			DATE	D DIRECTO	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES	unitered agent and title if applicable ERS AND DIRECTORS B ANE L L L L L L L L L L L L L	(NOTE I	13. 1.1 TIFLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TIFLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TIFLE 3.2 NAME 3.3 STREET 3.4 CITY-S 3.4 CITY-S	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS		n reinstating)			DATE	D DIRECTO	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFIC D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 580 S OCEAN BLVD PALM BEACH FL 3344 D	unitered agent and title if applicable ERS AND DIRECTORS B ANE L KE DR N A 80	(NOTE: I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS		n reinstating)			DATE	D DIRECTO Change Change	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3344	ANE KE DR N A 80	(NOTE I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP		n reinstating)			DATE	D DIRECTO Change Change	PRS IN 12 Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3341 D GRAGANELLA, JAMES 9984 BUCK POINT RE	unitered agent and tille if applicable ERS AND DIRECTORS R ANE KE DR N A 80	(NOTE I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS		n reinstating)			DATE	D DIRECTO Change Change	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE NAME STREET ADDRESS CITY: ST: ZIP TITLE MAME STREET ADDRESS CITY: ST: ZIP TITLE MAME STREET ADDRESS CITY: ST: ZIP TITLE NAME	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LA NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 580 S OCEAN BLVD PALM BEACH FL 3341 D GRAGANELLA, JAMES	unitered agent and title if applicable ERS AND DIRECTORS E ANE L A 80 S D 312	(NOTE I	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS	required whe	m reinstating) ADDITIONS	/CHANGES	TO OFFIC	DATE CERS AN	D DIRECTO Change Change	PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3341 D GRAGANELLA, JAMES 9984 BUCK POINT RE	ANE KE DR N A 80 S D 312	DELETE DELETE DELETE	13. 1.1 TIFLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TIFLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TIFLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TIFLE 4.2 NAME 4.3 STREET 4.4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS	facus	m reinatating) ADDITIONS	CHANGES	TO OFFIC	DATE CERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LA NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3344 D GRAGANELLA, JAMES 9984 BUCK POINT RE TALLAHASSEE FL 322 D TREADWAY, DOUGLA 300 TIMBERLANE RO	ANE KE DR N A 80 S D 312	DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE	ADDRESS T- ZIP ADDRESS ST- ZIP ADDRESS ST- ZIP ADDRESS T- ZIP ADDRESS T- ZIP	ALLIS TREAS	m reinatating) ADDITIONS EUT/SRUMY, TIMBE	CHANGES	TO OFFICE	DATE CERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LI NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVO PALM BEACH FL 3341 D GRAGANELLA, JAMES 9984 BUCK POINT RE TALLAHASSEE FL 322 D TREADWAY, DOUGLA	Justered agent and title if applicable LERS AND DIRECTORS R ANE L A 80 S D 312 L S AD 312	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ALLIS TREAS	m reinstating) ADDITIONS	CHANGES	TO OFFICE	DATE CERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS SITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LA NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3344 D GRAGANELLA, JAMES 9984 BUCK POINT RE TALLAHASSEE FL 322 D TREADWAY, DOUGLA 300 TIMBERLANE RO	Justered agent and title if applicable LERS AND DIRECTORS R ANE L A 80 S D 312 L S AD 312	DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ALLIS TREAS	m reinatating) ADDITIONS EUT/SRUMY, TIMBE	CHANGES	TO OFFICE	DATE CERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LA NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3344 D GRAGANELLA, JAMES 9984 BUCK POINT RE TALLAHASSEE FL 322 D TREADWAY, DOUGLA 300 TIMBERLANE RO	Justered agent and title if applicable LERS AND DIRECTORS R ANE L A 80 S D 312 L S AD 312	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	ALLIS TREAS	m reinatating) ADDITIONS EUT/SRUMY, TIMBE	CHANGES	TO OFFICE	DATE CERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICE D RICE, C. FREDERICK 4213 SNOWBERRY LA NAPLES FL 34119 D SHAW, ROBERT T 784 HARRINGTON LA VENICE FL 34293 D PATTERSON, JAMES 560 S OCEAN BLVD PALM BEACH FL 3344 D GRAGANELLA, JAMES 9984 BUCK POINT RE TALLAHASSEE FL 322 D TREADWAY, DOUGLA 300 TIMBERLANE RO	Justered agent and title if applicable LERS AND DIRECTORS R ANE L A 80 S D 312 L S AD 312	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ALLIS TREAS	m reinatating) ADDITIONS EUT/SRUMY, TIMBE	CHANGES	TO OFFICE	DATE CERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition

4. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, prior an attachment with an address.

SIGNATURE:

Souch TRESUM Sugge 4/2

850. 521.0742