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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Secretary of State

(941) 471-0003

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$45540

(9)

-STEVEN C. BROWN, P.A.

SIGNATURE:

BROWN & HEWITT, P.A.

rancipai maci	o or pusiness	Maining Address						
224 NE LAKEVIEW DR. SEBRING FL 33870 US		224 NE LAKEVIEW DR. SEBRING FL 33870-3147 US	SEBRING FL 33870-3147					
						1	ate of Last Report 18/1996	
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26			59-3068610	59-3068610 Not Applicable		
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	5. Certificate of Status Desired S8.75 Additional		
22			27				Fee Re	
City & State		├ ~~, ′	City & State			6. Election Campaign Financing \$5.00 May Be		
23 Zipi	Country	Country			Trust Fund Contribution Added to Fees			
24]	Country Zip Country 25 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
47]		Current Registered Agent	1301		10. Name and Address of New Re			
BRO!	WN, STEVEN C.		8	1 Name				
224		L	<u> </u>	Address (O.O. Down Museus in Most Appropriate				
	RING FL 33870		8	Street	Address (P.O. Box Number is Not Acceptate	неј		
025.			6	3				
			يا	4 0:				O- d-
			8	4 City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections (07.0502 and 607.1508, Florida Statu	tes, the abo	ve-named	corporation submits this statement for the p		hanging it	s registered
office or r	registered agent, or both, in the irn familiar with, and accept the	e State of Florida Such change was e obligations of Section 607 0505. F	authorized Iorida Statul	by the cor es	corporation submits this statement for the poration's board of directors. I hereby acce	ot the ap poi	ntment as	registered
	minima with and decopt the	e. obligations of become by sooo, in	orion orator	00.		•		
SIGNATURE	Signature, typed or project name of regis	stered agen) and title if applicable (NO	TE: Registered A	gent signatur	e required when reinstating)	DATE		
12.	OFFICE	RS AND DIRECTORS	13,		ADDITIONS/CHANGES TO OFFIC	CERS AND D	DIRECTOR	IS IN 12
THLE	P	DELETE	1.1 TITL			L	Change	Addition
NAME	BROWN, STEVEN C		1.2 NAM	E				
STRÆET ADORESS	224 NE LAKEVIEW DR		1.3 STRE	ET ADDRESS	į			
City - St - 7IP	SEBRING FL		1.4 CITY	-ST-ZIP		***************************************	_	
THTLE		☐ DELETE	2.1 TITL		Vice President	Ĺ	Change	Addition
N4M(22 NAM	E	F. Dean Hewitt			
STREET ADDRESS				FT ADDRESS	224 NE Lakeview Drive			
C:[Y-ST-7IP	,			-SI-Z⊮	Sebring, FL 33870			1
THEE		DELETE	3.1 1(1)		į	L	Change	L Addition
NAVE			3.2 NAM	Ĕ				
STREET ADDRESS			3.3 STRE	et address				
CITY - S1 - 7IP				-ST-ZIP			7.0	
TILE	☐ DELETE		4.1 TITLI			L,	Change	Addition
NAME			4. 2 NAN					
STREET ADDRESS				et address				
CITY - ST - ZiF	· · · · · · · · · · · · · · · · · · ·	D points		-ST-ZIP			70	
Title	☐ DELETE		5.1 TITLE			L.	Change	Addition
NAME			5.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-SI-70		- DOLLIE		- ST-ZIP			T Change	Addition
TIFLE		L DELETE	6 1 TITL		1	L	Change	Madition
NAME			62 NAM					
SPREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZiP	Land and the state of the state	and the state of t		-ST-ZIP	stated in Coation 110.07/2VIV Elevide Statute	n t fuethor e	partifu that	tho
informatic	rry certify that the information (In indicated on this annual rec	supplied with this filing does not qual port or supplemental annual report is	illy for the e true and ac	curate and	stated in Section 119.07(3)(i), Florida Statute d that my signature shall have the same lega report as required by Chapter 607, Florida S	al effect as if	f made un	der oath; that
Lam an o	flicer or director of the corpor	mun or the receiver or trustee empor	wered to ex-	ecute this	report as required by Chapter 607, Florida S	štatutes; and	d that my r	name

Steven C. Brown, President