FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

INSURANC STATE OF	VD. FL 32207 I Bus ness	Mailing Address PO BOX 1410 JACKSONVILLE FL: 28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 t Registered Agent	Country	3. Date Incorporated or Qualified 11/12/1936 4. FEI Number 59-0411385 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in Florida Statutes	3a. Date of Las 02/01 \$8. Fe \$5 Ad intangible tax under	t Report /1995 Applied For Not Applicable 75 Additional se Required .00 May Be ided to Fees
4811 BEACH BISUITE 200 JACKSONVILLE Principal Place of Suite, Apt. #, etc. City & State Zip INSURANC STATE OF	FL 32207 Business Country 25 Name and Address of Curren	PO BOX 1410 JACKSONVILLE FL: 28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country	11/12/1936 4. FEI Number 59-0411385 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for	\$8. \$5 Addintangible tax under	Applied For Not Applicable 75 Additional se Required .00 May Be ided to Fees
Suite 200 JACKSONVILLE Principal Place of Suite, Apt. #, etc. City & State Zip INSURANCE STATE OF	FL 32207 [Business Country 25 Name and Address of Curren	JACKSONVILLE FL 3 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country	11/12/1936 4. FEI Number 59-0411385 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for	\$8. \$5 Addintangible tax under	Applied For Not Applicable 75 Additional se Required .00 May Be ided to Fees
Frincipal Place of Suite, Apt. #, etc. City & State Zip 9. INSURANC STATE OF	Country 25 Name and Address of Curren	26 Suite, Apt. #, etc. 27 City & State 28 Zip 29		11/12/1936 4. FEI Number 59-0411385 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for	\$8. \$5 Addintangible tax under	Applied For Not Applicable 75 Additional se Required .00 May Be ided to Fees
Suite, Apt. #, etc City & State Zip 9. INSURANC STATE OF	Country 25 Name and Address of Curren	26 Suite, Apt. #, etc. 27 City & State 28 Zip 29		4. FEI Number 59-0411385 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for	\$8. Fe \$5 Ad intangible tax under	Applied For Not Applicable 75 Additional se Required .00 May Be ided to Fees
Suite, Apt. #, etc City & State Zip 9. INSURANC STATE OF	Country 25 Name and Address of Curren	26 Suite, Apt. #, etc. 27 City & State 28 Zip 29		59-0411385 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for	\$5 Ad intangible tax under	Not Applicable 75 Additional se Required .00 May Be ided to Fees
City & State Zip 9. INSURANC	Country 25 Name and Address of Curren	Suite, Apt. #, etc. 27 City & State 28 Zip 29		Certificate of Status Desired Election Campaign Financing Trust Fund Contribution This corporation has liability for	\$5 Ad intangible tax under	75 Additional see Required .00 May Be ided to Fees
City & State Zip 9. INSURANC	Country 25 Name and Address of Curren	27 City & State 28 Zip 29		Election Campaign Financing Trust Fund Contribution This corporation has liability for	\$5 Ad intangible tax under	ee Required .00 May Be ided to Fees
9. INSURANCE STATE OF	25 Name and Address of Curren	28 Zip 29		Trust Fund Contribution 8. This corporation has liability for	Ad intangible tax under	.00 May Be ded to Fees
INSURANC STATE OF	25 Name and Address of Curren	Zip 29		8. This corporation has liability for	Ad intangible tax under	ded to Fees
INSURANC STATE OF	25 Name and Address of Curren	29				rs 199.032,
INSURANC STATE OF	Name and Address of Current		[30]	I Florida Statutes I I Ves		
INSURANC STATE OF		r riogistored rigent		10. Name and Address of New R		
STATE OF	E COMMISSIONER		81 Name	IV. Name and Address of New N	edistered Whelir	
STATE OF	L COMMISSIONICAL LEGICAL COMMISSIONICAL COMMISSIONI		B2 Street Add	dress (P.O. Box Number is Not Acceptab	(in)	
	STATE OF FLORIDA			oress (F.O. Box Number is Not Acceptab	ne;	
CAPITOL E			83			***************************************
TALLAHAS	SEE FL 32301		84 City		8 5	Zip Code
			- "	oration submits this statement for the pur	PL I	,
ı	OFFICERS AND			ADDITIONS/CHANGES TO OFF	CATE ICERS AND DIREC Chang	
REEL ADDRESS	GIBSON, R. J. 135 RIVERSIDE AVE			OST, J.M.		
Y - \$1 - Z -P	JACKSONVILLE FL		■ **	811 Beach Blvd., Ste	200	
	S	☐ DELETE	2 1 TITLE	acksonville, FL 32207	Chang	ge Addition
Æ	HANLEY, PRISCILLA E.		22 NAME			
EET ADDRESS	135 RIVERSIDE AVE		23 STREET ADDRESS 4	811 Beach Blvd., Ste.	200	
S1 - ZIP	JACKSONVILLE FL	45) or ore	24 CITY-ST-ZIP			
E 1 _E	CD	Æ D DELETE Ö	3 1 TITLE C	/D EEHBLER, N.C.	☐ Chang	e 🖫 Addition
FLI ADDRESS	MONTGOMERY, CHESTER (135 RIVERSIDE AVE	U		001 Wade Avenue		
ST-ZIP	JACKSONVILLE FL			aleigh, NC		
F	AD OUT THEFT I F	₹] DELETE	4. 1 TITLE		Chang	e 🔲 Addition
ı	KLARAS, DONALD A		4.2 NAME			—
EET ADDRESS	135 RIVERSIDE AVE		4.3 STREET ADDRESS			
Y ST-71P	JACKSONVILLE FL		4 4 CITY - ST - ZIP		···	
E .	PD CONTRACTOR D	DELETE	5 1 TITLE		Chang	e 🔲 Addition
#:	GHEGAN, JOHN R.		5.2 NAME	Bll Beach Blvd., Ste.	200	
Y-ST-Z-P	135 RIVERSIDE AVENUE JACKSONVILLE FL		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	TT DEGCII DIAN.\ 206.	200	
F	AUOUSOMAILLE LT	DELETE	6 1 TITLE		(X) Chang	e 🗍 Addition
a.			6 2 NAME		Car - Many	
EFT ADDRESS			6.3 STREET ADDRESS			
r - S1 - ZIP			6 4 CHTY- ST- ZIP	for the exemption stated in Section 119.		

SIGNATURE: