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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 146205

(0)

BYRON HARLESS, REID & ASSOCIATES, INC.

FILED
Apr 17 1997 8:00am
Secretary of State

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Principal Pla	ce of Business	Mailing Address	ailing Address			- A TODAN TIDIA MARIE BETAN BEGAN DENDI DENDI DIDER DABIL DIDIA MARIE DIDIA MARIE DIDIA MARIE DEDIA MARIE				
4651 SALISB		4651 SALISBURY	ROAD							
330		330	330							
JACKSONVIL US	LE FL 32256	JACKSONVILLE I US	JACKSONVILLE FL 32256-0835 US			3. Date Incorporated or Qualified				
2. Principal	Place of Business	2a. Mailing Addre	ess			4. FEI Number		Ap	plied For	
21		26	26			59-0549943			Applicable	
Suite, Apt 22	t #, <b>e</b> tc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Sta 23	ato	City & State	1			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zφ	Country	Zip	Co	ountry		8. This corporation has liability for in			199.032,	
24	25	29	30				Yes 💢 No			
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Reg	istered Agen	<u>t</u>		
RE	EID,MELVIN P.PH.D.			81	Name					
4651 SALISBURY ROAD SUITE 330				82	Street Add	ress (P.O. Box Number is Not Acceptab	.e)			
	ACKSONVILLE FL 32256			83						
				84	City		85	Zip C	Code	
							-L	1		
office or agent. I SIGNATURE	am familiar with, and accept the obt	igations of, Section 607.	0505, Florida St	atute	S.	ocration submits this statement for the p tion's board of directors. I hereby accep red when reinstating)	DATE		egisiereo	
12.		ND DIRECTORS	13	١,		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTOR	S IN 12	
THEF	C	☐ DE	LETE 1.1	TITLE				Change	Addition	
NAME	REID, MELVIN P		1.2	NAME						
STREET ADDISESS		DRIVE	1.3	STREET	ADORESS					
C-TY - ST - ZIP	JACKSONVILLE, FL 00000			CITY-5	ST-ZIP					
THIE	VD	☐ DE	LETE 2.1	TITLE			Ш	Change	Addition	
NAME	REYNOLDS, GERALD E.		2.2	NAME						
STREET ADDRESS			2.3	STREET	ADDRESS					
CITY - S* - 74P	PONTE VEDRA BEACH FL	DE		CITY-	S1 - 21P	- <u> </u>		Change	Addition	
TITLE	D VALUINES CUDISTODUED			TITLE			□,	Monge	LL Addition	
NAME	KALKINES, CHRISTOPHER 1	•		NAME						
STREET ASURESS	NEPTUNE BCH FL			. CHTY-	ADDRESS					
CHY-ST-ZP THLE	HEI TONE BOTTE	□ DE		TITLE	31-21			Change	☐ Addition	
NAME		<del></del>		2 NAME				-		
STREET ADORESS	.				ADDRESS					
CITY ST ZIE				CITY-S						
THE		☐ DE		TITLE				Change	☐ Addition	
NAMz			5.2	NAME						
STREET ADORESS	5		5.3	STREE	F ADDRESS					
CHY-SI ZP				CITY-	ST-ZIP					
TITLE		☐ DE	LETE 61	TITLE				Change	Addition	
NAM) .			62	NAME						
STREET ACIDATES!	';		63	STREE	r address					
CITY ST ZIP	1			City-					al .	
All Lake hose	who continue that the information curry	had with this filing done.	not auglify for th	10 014	amotion state	d in Section 119 07(3)(i). Florida Statute	s i further cer'	orv that	IDA	

t do heroby 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, or on an attachment with an address.

SIGNATURE:

4-10-97 (904) 296-7117