## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

TITLE

NAME

STREET ADDRESS

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Sep 18 1997 8:00am

Secretary of State

Change

Addition

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	N C. AND GENE C. WHITE	( - /			
18525 S.W. 293 TERRACE		18525 S.W. 293 TERRACE			
HOMESTEAD		HOMESTEAD FL 33030			
				DO NOT WRITE	IN THIS SPACE
				<ol><li>Date Incorporated or Qualified</li></ol>	3a. Date of Last Report
				10/21/1949	08/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied for
1		26		59-6069153	Not Applic
Suite, Apt	#, <del>e</del> tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition
Oh a Oh		City 9 State			Fee Required
City & State	ө	City & State		6. Election Campaign Financing	\$5.00 May Be
	Country	28] Zip	Country	Trust Fund Contribution	Added to Fees
Zip	25i	<del></del>	30	<ol> <li>This corporation owes or has pa Personal Property Tax due June</li> </ol>	
·I	9. Name and Address of Curren		30]	10. Name and Address of New Re	
DI.	NNIGAN, JENNIFER A.		81 Name		
19505 SW 902 TEDDACE					
			82 Street Ada	dress (P.O. Box Number is Not Acceptat	ole)
110	MEGIEND I E 00000		83		
			B4 City		FL 85 Zip Code
agent I a	m familiar with, and accept the oblige Signature, typed or printed name of registered ago OFFICERS AN	nj and tille if applicable. (NOTE	rida Statutes.  Registered Agent signature req	rporation submits this statement for the pation's board of directors. I hereby acception to the pation's board of directors. I hereby acception and the patients of the patien	DATE
TLE	OFFICERS ANI	D DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Ad
	WEBSTER, GRAHAM.	- Detter			Chounte Chu
AME	19800 SW 180 AVE #255		1.2 NAME		
TREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS		
ITY-ST-ZIP	Ab LP	DELETE	1.4 CITY - ST - ZIP		Change Ad
TLE	WEBSTER, GLENN.	L Detere	2.1 TITLE		L Change L Au
AME	16098 BAILEY HILL RD		22 NAME		
TREET ADDRESS	BROOKSVILLE FL		2 3 STREET ADDRESS		
fTY-ST-ZIP	S S	DELETE	2 4 CITY-ST-ZIP		Change Ad
ITLE	DUNNIGAN, JENNIFER.	F" DEFEIG	3.1 TITLE		Change Ad
AME	18525 S.W. 293 TERR.		3.2 NAME		
TREET ADDRESS	HOMESTEAD FL		3.3 STREET ADDRESS	•	
ITY-ST-ZIP	TOMESTEAU FL	D on the	3.4. CITY - ST - ZIP		Dohana Die
TLE	Webster, Gregg	☐ DELETE	4.1 TITLE		Change Ad
AME :			4. 2 NAME		
TREET ADÓRESS	702 CPIMTU RD 467		4.3 STREET ADDRESS		
ITY-ST-ZIP	LAKE PANASOFKEE FL		4.4 CITY-ST-ZIP		
ITLE		DELETE	5.1 TITLE		☐ Change ☐ Ac
IAME			5.2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		ř
CITY-ST-ZIP			5.4 CITY - ST - ZIP		*

14. I do 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, or on an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE