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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 14 1997 8:00am

Secretary of State

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	1997	1.3								
DOCU 1. Corporation	MENT # 25147	3	(5)							
THE C	OPELAND CO., INC.									
Principal Place of Business Mailing Address								(ii dinii i	fari Biril Biril All	10 01011 1801
2001 PAN AM CIR., RM 109			2001 PAN AM CIR., RM 109							
PO BOX 2349 TAMPA FL 33			BOX 23493 IPA FL 33607-2312							
							 Date Incorporated or Qualified 09/23/1961 		Date of Last 0 05/14/1996	
2. Principal Place of Business			2a. Mailing Address				4. FET Number 59-0947237		}	pplied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.							lot Applicable Additional
22			27				Certificate of Status Desired			beriupel
City & State			City & State				6. Election Campaign Financing	.		May Be
23 Zip	Zip Country						Trust Fund Contribution 8. This corporation has liability fo	r intendi		to Fees
24	25]	29	∱ }						□ No	s. 100.00a.,
	9. Name and Address of Curr	ent Registe	red Agent		==T		10. Name and Address of New R	egister	ed Agent	
	ITHRIE, HUGH				B1	Name				
2001 PAN AM CIRCLE STE 109 TAMPA FL 33609					B2	Street Add	ddress (P.O. Box Number is Not Acceptable)			
174	WLV LF 22002			ļ.	B3					
).	84	City			. 85 Zip	Code
						•		F	·L ` `	
 Pursuant office or 	t to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607 ite of Florida	'.1508, Florida Statu . Such change was	ites, the ab- authorized	ove- by 1	named corpora	poration submits this statement for the tion's board of directors. I hereby acce	purpose opt the a	e of changing appointment as	its registered registered
		igations of, S	Section 607.0505, F	iorida Statu	itos.		·			_
SIGNATURE	Signature, typed or printed name of registered a	agent and tile if a	applicable. (NO	II Registered	Agent	t signature requi	ired when reinstating)	DATE		
12.	OFFICERS A	ND DIRECT		13.			ADDITIONS/CHANGES TO OFFI	CERS A		
TITLE NAME	SD Guthrie, Jewel		DELETE	1.1 THU		1			Change	Addition
STREET ADDRESS		109		1.2 NAM 1.3 STR		DDRESS				
CITY-ST-ZIP	TAMPA FL	,,,,		1.4 CITY		Ť				
THLE	TD		DELFTE	2.1 1171	[Change	Addition
NAME	GUTHRIE, HUGH	400		2.2 NAN						
STREET ADDRESS	2001 PAN AM CIRCLE STE. TAMPA FL	109		1		DORESS				
CITY-ST-ZIP TITLE	PD		DELETE	2 4 CII 3.1 Titt		· ZII'			Change	Addition
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CITY-ST-ZIP	TAMPA FL			3.4. C(T		- ZIP				
TITLE	VP		☐ DELETE	4.1 70 L		{			L Change	Addition
STREET ADDRESS	BUTERA, MARISA 6624 JENNIFER DR			4. 2 NAI		DDDGG				
CITY-ST-ZIP	TEMPLE TERRACE FL			4.3 STR 4.4 CITY		DDRESS				
TITLE	I SHIP OF THE STATE OF THE		DELETE	5.1 TRL		E 15			☐ Change	Addition
NAME				5.2 NAN	ME.	1			ŕ	
STREET ADDRESS				5.3 STR	EE 1 A	DDRESS				
CITY-ST-ZIP				5,4 CITY		ZIP				
TITLE			☐ DELETE	61 Inc		ţ			L Change	Addition
NAME OTOSET ADDRESS	į .			6.2 NAN		DDWsas				
STREET ADDRESS						DDHESS				
CITY-ST-ZIP	by certify that the information suppl	ied with this	filing does not qual	64 City for the e			d in Section 119.07(3)(i) Florida Statut	es I furt	ther certify that	the

1 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 logal effect as if made under eath; that I am an officer or director of this 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.

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