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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 06 1997 8:00am

3/4/97 904-385-8131

Sandra B. Mortham

				tary of State CORPORATIONS		Secretary of State		
DOCUN 1. Corporation	MENT # 255		(4)				14 200 0 1400 1100 1100 110	
Principal Place of Business 1219 W. THARPE STREET P.O. BOX 4164 TALLAHASSEE FL 32303		1219 P.O. I	Mailing Address 1219 W. THARPE STREET P.O. BOX 4164 TALLAHASSEE FL 32303-4607					
						3. Date Incorporated or Qualified 01/23/1962	3a. Date of Last F 03/01/1996	Report
2. Principal Pi	ace of Business	2a. Ma 26	ailing Address			4. FEI Number 1 59-1031415		pplied For ot Applicable
– Suite, Apt⊣ J	#, etc	þ	uite, Apt. #, etc.			5. Certificate of Status Desired		Additional lequired
City & State	· · · · · · · · · · · · · · · · · · ·	27 Cr	ty & State	<u></u>		Election Campaign Financing Trust Fund Contribution	<u></u> \$5.00	May Be
Β] - Ζφ []	Country 25	Zip	`	Country 30		8. This corporation has liability for		
	9. Name and Address of					10. Name and Address of New R		
	SCOTT, JAMES T. 2 OAK HILL TRAIL			81 1	Name			
			82 5	Street Add	reet Address (P.O. Box Number is Not Acceptable)			
IAU	LAHASSEE FL 32312			83	· · · · · · · · · · · · · · · · · · ·			
						······································		
				84 (City		FL 85 Zip	Code
	to the provisions of Sections egistered agont, or both, in milaniliar with land accept	the State of Florida the obligations of Se	1508, Florida Statute Such change was a ection 607.0505, Flo	es, the above-nuthorized by the orida Statutes.	iamed corp ie corpora	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing apt the appointment as	ts registered registered
	Signature, typical or product name of re-		·		ignature requi	red when reinstating)	DATE	
2. 11.F	P	ERS AND DIRECTO	DRS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFI	ICERS AND DIFFECTOR Change	RS IN 12
AME	PRESCOTT, JAMES T.	•	LJ bress	1.2 NAME			L. Cruingo	Addition
REELADORESS	3572 OAK HILL TRAIL			1.3 STREET AD	DRESS			
Tr-SI-ZIF	TALLAHASSEE, FL 00	000		1.4 CIYY-ST-2	IP			
'l f	VP		DELETE	2.1 TITLE			☐ Change	Addition
M:	PRESCOTT, CHARLES	5 A.		2.2 NAME				
REET ADDRESS	3721 GALWAY DRIVE TALLAHASSEE FL			2.3 STREET AD		•	_	
TY-ST_ZIP ILE	VP		DELETE	2. 4 CITY - ST - 3.1 TITLE	ZIP		Change	Addition
Me.	PRESCOTT, ROBERT	E.		3.2 NAME	Ì		<u> </u>	
REEL ADDRESS	3042 STILLWOOD CT.			3.3 STREET AD	ORESS .	1140 REECH Ridge	TR.	
1Y - ST - ZIP	TALLAHASSEE, FL 00	000		3.4. CITY-ST	ZIP 7	1140 Beech Ridge FALIALASSEE, FL 32	312	
T.F	ST BADRADA	LIA	DELETE	4 1 TITLE		,	☆ Change	Addition Addition
AME	PRESCOTT, BARBARA 3042 STILLWOOD CT.			4 2 NAME		a 9 19.1	T-	
DREET ADORESS	TALLAHASSEE FL	•		4.3 STREET AD	DRESS	1140 BEECL Ridge:	TR.	
TLF			DELETE	5.1 TITLE	HE .	TAllahassee, Fl. 33	Change	Addition
A!ME				5.2 NAME			-	
TREET ADORESS				5.3 STREET AD	DRESS			
TY-ST ZIF			T	5.4 CITY - S1 - 7	IP I	· · · · · · · · · · · · · · · · · · ·		
TLE			L] DELETE	6.1 TITLE			[] Change	Addition
AME transportes				6.2 NAME	DDECO			
HEET ADORESS HTT-S*-7IP				6.3 STREET AD 6.4 CITY - ST - 2	l l			
4. Loo beret	by certify that the information	n supplied with this f	iling does not qualif	y for the exemi	ntion state	d in Section 119.07(3)(i), Florida Statut	es. I further certify that	t the
informatio Lami an of appears in	i indicated on this annual ri flicer or director of the corpo n Block 12 or Block 13 if chi	eport or supplement oration or the receive anged, or organ aga	ai annual report is tr ar or trustee empow schment with an add	rue and accura ered to execute Iress.	te and tha e this repo	t my signature shall have the same leg rt as required by Chapter 607, Florida	al effect as if made un Statutes; and that my	ider oath; tha name