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



## Sandra B. Mortham

FILED
May 08 1997 8:00am
Secretary of State

COI ANN	PROFIT RPORATION UAL REPORT 1997 MENT # 36307	1	Sandra I Secreta	RTMENT OF STATE  3. Mortham  ITY of State  CORPORATIONS	_	1997 8:00a ary of State
Principal Place of Business Mailing Address  3850 RECKER HWY. WINTER HAVEN FL 33880 US  Principal Place of Business Mailing Address WINTER HAVEN FL 33880 US  WINTER HAVEN FL 33883-2707 US						
					3. Date Incorporated or Qualified 04/24/1970	3a. Date of Last Report 06/10/1996
<b>—</b>	Place of Business	F-3	Mailing Address		4. FEI Number <b>59-1289368</b>	Applied For
Suite, Apt	. #, etc.	26	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicat  \$8.75 Additional
City & Sta	ato.	27	City & State			Fee Required
City & Sta	no	28	Oity & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	29	Zip	Gountry	8. This corporation has liability for Florida Statutes	
	9. Name and Address of Cui		tered Agent	81 Name	10. Name and Address of New Re	gistered Agent
338	80			83		
11. Pursuant office or ac 8 t. I	t to the provisions of Sections 607, registered agent, or both, in the S am familiar with, and accept the of			84 City les, the above-named corauthorized by the corpora	rporation submits this statement for the patients and directors. I hereby acce	
•	to the provisions of Sections 607, registered agent, or both, in the Sam familiar with, and accept the of Signature, typed or printed name of registered		if applicable (NO)	84 City		PL   DUTPOSE of changing its registered pt the appointment as registered
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14. 106 hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.0/(3)(i), Forda Statutes. Turner certify that the information his annual report as supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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:

1. Forda Statutes. Turner certify that the first that is a same legal effect as if made under eath; 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.

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2. HALL

3. 3. 3. 3. 441