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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

Corporation Name

SIGNATURE:

DOCUMENT # 416799

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PAIM COA	SI ARSIE	KAI:I X	HHE.	INC:

Principal Place of Business Maling Address EXECUTIVE OFFICE **EXECUTIVE OFFICE** PALM COAST FL 32151 PALM COAST FL 32151 3. Date Incorporated or Qualified 3a. Date of Last Report 01/15/1973 05/01/1995 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 14 OFFICE 13-2809333 14 OFFICE Purk Dr. Not Applicable Suite Apt. #, etc. Su/ソイ Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required Ouv & State 6. Election Campaign Financing \$5.00 May Be oust \Box 23 28 Trust Fund Contribution Added to Fees Country 30 US /7 Country 8. This corporation has liability for intangible tax under s 199.032, US A 25 29 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent H. ADAMS Dr. CT CORPORATION SYSTEM 82 IICE Purk 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the prate of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, fird accept the obligation of 507.0505, Florida Statutes. ADAMS)r. ChMN ioseph H SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE. Change TITLE Addition Addition 1. 1 TITLE ARMOUR, WILLIAM NAME 12 NAME OFFICE PARK Dr. EXECUTIVE OFFICE, 1 CORPORATE DRIVE STREET ADDRESS 1.3 STREET ADDRESS PALM COAST FL Das CITY-ST-ZIP 1.4 CITY-ST-ZIP PD DELETH TILLE 2.1 TITLE Addition ADAMS, JOSEPH JH. JR. NAME 2 2 NAME EXECUTIVE OFFICE, 1 CORPORATE DRIVE STREET ADDRESS 2 3 STREET ADDRESS PALM COAST FL City-S1-ZiP 2.4 CITY - ST - ZIP DELETI TITLE 3 1 TITLE PRESTRIDGE, HERSHEL NAME 3.2 NAME Dr. Suse 1 EXECUTIVE OFFICE, 1 CORPORATE DRIVE STREET ADDRESS 3.3 STREET ADDRESS PALM COAST FL CITY-ST-ZIP 3.4 CITY - ST - ZIP DELETE. TITLE VD 4. 1 TITLE Change Addition CUFF, ROBERT G. NAME 4.2 NAME EXECUTIVE OFFICE, 1 CORPORATE DRIVE STREET ADDRESS 4.3 STREET ADDRESS PALM COAST FL CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE TIFLE ☐ Addition 5 1 TITLE BRAUNSTEIN, RICHARD NAMĒ 5.2 NAME EXECUTIVE OFFICE, 1 CORPORATE DRIVE STREET ADDRESS 5.3 STREET ADDRESS PALM COAST FL CITY - ST - ZIP 5.4 CITY - ST- ZIP DELETE THE 6 1 TITLE ☐ Change Addition NAME POWERS, RICHARD 6.2 NAME 1330 AVE. OF THE OFFICE STREET ADDRESS 6.3 STREET ADDRESS **NEW YORK NY** City-St-7iP 6.4 CITY - ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

305454 N. ADAM53. 3/7/96 9044450800