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

1997

DOCUMENT # 432569 (2)

rincipal Place of Business	Mailing Address
80 N ATLANTIC AVENUE	8680 N ATLANTIC AVENUE
PE CANAVERAL FL 32920	CAPE CANAVERAL FL 32920-3428

FILED May 08 1997 8:00am Secretary of State



						<u> </u>	 Date Incorporated or Qualified 08/09/1973 		ate of Last 24/1996			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	\ <u>.</u> .		Applied For			
21 26				100			59-2734745			Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.			, etc.				5. Certificate of Status Desired		\$8.75	Additional		
22 27							b. Certificate of Status Desired			Required		
City & State City & State							6. Election Campaign Financing		\$5.0	May Be		
23 28				 			Trust Fund Contribution		Adde	d to Fees		
Žip	Country	Z ip	<u> </u>	Country			8. This corporation has liability for			s. 199.032,		
24 25 29 30					Florida Statutes Yes No							
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
STO	ITTLER, RICHARD H. JR.			81	Name		The second second					
8880 N. ATLANTIC AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)								
CAPE CANAVERAL FL 32020				Supplications (1.0. Box Hamber 13 Het Accompanie)								
				83								
				84	0.4.				Tee 1 3:	- 6-4-		
				84	City			FL	65 Zi	p Code		
11. Pursuani	I to the provisions of Sections 607.05	02 and 607 1508, Flo	rida Statutes, the a	bove	e-named c	corpora	ation submits this statement for the	e purpose o	changing	its registered		
office or	I to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with land accept the obli	te of Florida, Such cha	inge was authorize	ed by	y the corpo	oration	's board of directors. I hereby acc	cept the app	xointment a	as registered		
	and accept the con	gations of, Section to	r.0000, 1 lorida ala	ALUIC.	o.					ļ		
SIGNATURE	Standario, typed or prosed reason of registried a	nerr, and tille if applicable	(NOTE: Reprister	ed Ao	ent signature (required w	when reinstating)	DATE		***************************************		
12.		ND DIRECTORS	13				ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	ORS IN 12		
TITLE	VID		DELETE 1.1	ITLE		SRD	177D		Change	e 🔼 Addition		
NAME	MCLOUTH, MALCOLM E.		1.2	MAME	ì		. WASDIN			ľ		
STREET ADDRESS	AAAA AL ATLANDO ALED				ADDRESS		0 N. ATLANTIC AVE					
CITY-51 ZIP	CAPE CANAVERAL FL				ST-ZIP	CAP	E CANAVERAL, FL	32920)		
1011	PD			TITLE	31-21			<u> </u>	Change	e Addition		
NAM?	STARMER, WILLIAM E.		1 ·	NAME	}							
•	DAGE ALL ATT ALLO ALCO				r address					1		
STREET ADDRESS	CAPE CANAVERAL FL		1		- 1		en de la companya de					
ÇiTY-ST-Z#	U UNITED TE			CHY-	ST-ZIP	DCE	Vm		Change	e K Addition		
HILL	SMITH, EDWIN J.		•		1		- 		Onlang	, TE HOOMBH		
NAME	MAAA AL ANI ARITHU ALE			NAME		RIC	HARD H.STOTTLER, 10 N. ATLANTIC AVE	JR.				
STREET ADDRESS			1		ADDRESS							
CITY - S1 - ZIP	CAPE CANAVERAL FL	·			ST-ZIP	CAP	E CANAVERAL, FL	32920	1 200			
117_F	SD HIDELO	LJ		TITLE		٠.			Change	e 🔲 Addition		
NAME	DEEVERS, JUDITH C.		4.2	NAME	Į.							
STREET ADDRESS			4.3	STREET	TADDRESS					ļ		
CITY - ST - ZIP	CAPE CANAVERAL FL	···		CITY-S	ST-ZIP		·		- 			
THTEE	VD		DELETE 5.1	TITLE	- !		v.		Chang	e 🔲 Addition		
NAME	PEKER, JOHN A.		5.2	NAME		:	:			Į		
STHEEL AUDRESS			53	STREET	T ADDRESS							
CHTY ST-74P	CAPE CANAVERAL FL		5.4	CITY-S	ST-ZIP)		
THLE	SRVD			TITLE			······································		☐ Chang	e 🔲 Addition		
N4Mi	KAZMIERCZAK, EUGENE J.		6.2	NAME						ľ		
SIRELL ADDRESS	AND ATTACKED BLE		6.3	STREET	T ADDRESS		(i))		
1	CAPE CANAVERAL FL		1		ST-ZIP					ſ		
CITY - S1 - ZIF				VIII - 1	VI 7611							

14. If 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 efficer 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

SIGNATURE:

Daytime Phone # 0109874