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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

	MENT INSTREMENT AG	# <b>4371</b> GENCY, INC	14		(2)			} } \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		Titalii alahi bidii dadii da
Principal Place	e of Business			Mailing Addres	·					
15 N STE P.O. BOX QUINCY F	WART ST 820			15 N STEW P.O. BOX : OUINCY FI	VART ST B20					
								<ol> <li>Date Incorporated or Qualified 09/28/1973</li> </ol>	3a. Date of I	.ast Report 18/1995
2. Principal Pl	ace of Busines	SS	28	. Mailing Add		·····	***************************************	4, FEI Number		Applied For
Suite, Apt.	# oto		26		~~~	320		59-1484985		Not Applicable
22			27	L				5. Certificate of Status Desired	□ \$	8.75 Additional Fee Required
City & State	)		28	City & State QUINCY				Election Campaign Financing     Trust Fund Contribution		5.00 May Be Added to Fees
Ζφ <b>24</b> ]		Country 15	29	<sup>Ζφ</sup> 32353-	-0820	Countr 30	у	8. This corporation has liability for Florida Statutes Yes	Intangible tax un	der s 199.032,
	9, Name a	ind Address of Currer	nt Regis	stered Agent				10. Name and Address of New I		nt
MAHA	ffey (Willi	IAM W)				81	1	dress (P.O. Box Number is Not Acceptal		
	BELLAMY I					02	Street Add	dress (F.O. Box Number is Not Acceptal	ole)	
QUINC	CY FL 32351					83				
				-		84	City		85	Zip Code
11. Pursuant to	o the provision	s of Sections 607 0502	2 and 60	7 1508 Florid	a Statutar	the chair				
or registere familiar witl	ed agent, or by h, and accept	oth, in the State of Florid the obligations of, Sect	ida. Such Lion 607	h change was .0505, Florida	authorized Statutes,	by the corp	xoration's box	oration submits this statement for the pu ard of directors. I hereby accept the app	rpose of changing ointment as regis	g its registered office tered agent, i am
	Signature, typoid or p				:					
12.		printed name of registered agent OFFICERS ANI	and title if a	applicarie	:			red when reinstating)	DATE	
12.	VP	printed name of registered agent OFFICERS ANI	and title if a	applicarie	(NOTE	Flogistered Ago			DATE ICERS AND DIRE	CTORS IN 12
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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. I further 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

SIGNATURE: \_/

SIGNING OF ICER OR DIRECTOR

4-29-96 904-627-6262 Daytine Phone #