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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

FILED Mar 23 1998 8:00am Secretary of State

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22 Cliy & State 28 Cliy & State 28 Cliy & State 28 County State 29 County State 29 County State 29 State 29 State 29 State 29 State 29 State		#, etc.	Suite, Apt. #, etc.					
22) Country 27p Country 37p Country 8, Trust form Confidential Confide			27			b. Certificate of Status Desired		
20 Zip Zip Zip Country Zip Country S. This corporation owes or has per fraingible page Trust Fund Centribution Added to Feee Zip	_ ′	е	City & State			6. Election Campaign Financing	\$5.00 May Be	
28						Trust Fund Contribution		
9. Name and Address of Current Registered Agent GURLEY, DAVID E 1819 MAIN ST. SUTTE 610 SARASOTA FL 34296 82 Street Address (P.O. Box Number is Not Acceptable) 83 Surper Address (P.O. Box Number is Not Acceptable) 84 City		-	-		ntry	8. This corporation owes or has paid the c	urrent year Intangible	
GURLEY, DAVID E 1819 MAIN ST. SUFFE 610 SARASOTA FL 34236 82 Street Address (P.O. Box Number is Not Acceptable) 83 Size of Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zup Code 85 Size of Address (P.O. Box Number is Not Acceptable) 86 Size of Address (P.O. Box Number is Not Acceptable) 87 Size of Address (P.O. Box Number is Not Acceptable) 88 Size of Address (P.O. Box Number is Not Acceptable) 89 Size of Address (P.O. Box Number is Not Acceptable) 80 Size of Address (P.O. Box Number is Not Acceptable) 81 Name FL 85 Zup Code 82 Size of Address (P.O. Box Number is Not Acceptable) 80 FL 85 Zup Code 81 Name FL 85 Zup Code 82 Size of Address (P.O. Box Number is Not Acceptable) 83 Size of Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zup Code 85 Size of Address (P.O. Box Number is Not Acceptable) 85 Size of Address (P.O. Box Number is Not Acceptable) 86 Size of Address (P.O. Box Number is Not Acceptable) 87 Size of Address (P.O. Box Number is Not Acceptable) 88 Size of Address (P.O. Box Number is Not Acceptable) 89 Size of Address (P.O. Box Number is Not Acceptable) 80 Size of Address (P.O. Box Number is Not Acceptable) 81 Size of Address (P.O. Box Number is Not Acceptable) 82 Size of Address (P.O. Box Number is Not Acceptable) 84 City Of Address (P.O. Box Number is Not Acceptable) 85 Size of Address (P.O. Box Number is Not Acceptable) 86 Size of Address (P.O. Box Number is Not Acceptable) 87 Size of Address (P.O. Box Number is Not Acceptable) 88 Size of Address (P.O. Box Number is Not Acceptable) 89 Size of Address (P.O. Box Number is Not Acceptable) 80 Size of Address (P.O. Box Number is Not Acceptable (P.O. Box Number is Not Acceptable) 89 Size of Address (P.O. Box Number is Not Acceptable) 80 Size of Address (P.O. Box Number is Not Acceptable (P.O. Box Number is Not Acceptable) 80 Size of Address (P.O. Box Number is Not Acceptable) 80 Size of Addr	24		1=-1	30				
BEZ. Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Pursuant to the provisions of Socions 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in framework in an accept the obligations of, Socion 607.0505, Florids Statutes SIGNATURE 12.			rent Registered Agent		0.0	10. Name and Address of New Registered	I Agent	
SUTTE 610 SARASOTA FL 34236 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floride, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and time ill septiculus. SIGNATURE Signature, typed or printed have of registered agent and time il septiculus. MACALLISTER, CRAIG STREET ADDRESS STREET				ŀ	Name			
SARASOTA FL 34236 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent and are all agents and all are all agents and are all agents and are all agents and all are all agents and agents				-	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
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11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and femiliar with and accept the obligations of Soction 607.0505, Florida Statutes SIGNATURE				<u> </u>	84 City		85 Zio Code	
SIGNATURE Signature. Agried or printed name of registered agent and bits if expectative OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE PD			· · · · · · · · · · · · · · · · · · ·		i i	FI		
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14. I 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 officer or director of the corporation or the problem 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 or at a participant with an address.

SIGNATURE: