## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DC	٠,	١N	10	= N	ıΤ	

SIGNATURE: 1

480673

(3)

or both, in the State of Flori cept the obligations of, Sect ederproteinanceling constages	2 and 607.1508, Florida 3 ida Such change was au tion 607.0505, Florida St	Statutes, thuthorized by	81 82 83 84 94 hie above- y the corp	Name Street Addr	10. Name and Address of Ne ress (P.O. Box Number is Not Access tration submits this statement for the ard of directors. I hereby accept the a	for intangible to Yes No No No Registered ptable)	\$8.75 Fee I \$5.00 Added ax under s Agent  85 Zir anging its n s registered	Applied For Not Applicable is Additional Required O May Be d to Fees 199.032,
Country  25 ne and Address of Current  N.H.  #1 FL 32960 risions of Sections 607,0500 or both, in the State of Floricept the obligations of, Sections of reputational age.	26 Suite, Apt. #, e 27 City & State 28 Zip 29 nt Registered Agent 2 and 607.1508, Florida State Such change was aution 607.0505, Florida State S	Statutes, thuthorized by tatutes.	81 82 83 84 84 9 the corp	Name Street Addir City named corpor oration's boar	O7/16/1975  4. FET Number 59-1615322  5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability Florida Statutes 10. Name and Address of Neress (P.O. Box Number is Not Accept ration submits this statement for the address of directors. I hereby accept the address of when rensteting.	for intangible to Yes No No No Registered ptable)	\$8.75 Fee I \$5.00 Added ax under s Agent  85 Zig anging its n s registered	Applied For Not Applicable is Additional Required O May Be d to Fees 199.032,
Country  25 ne and Address of Current  N.H.  #1 FL 32960 risions of Sections 607,0500 or both, in the State of Floricept the obligations of, Sections of reputational age.	26 Suite, Apt. #, e 27 City & State 28 Zip 29 nt Registered Agent 2 and 607.1508, Florida State Such change was aution 607.0505, Florida State S	Statutes, thuthorized by tatutes.	81 82 83 84 84 se abovo- y the corp	Name Street Addir City named corpor oration's boar	59-1615322  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability Fiorida Statutes  10. Name and Address of Neress (P.O. Box Number is Not Acceptant Address (P.O. Box Number is Not Acceptant Address (P.O. Box Number is Not Acceptant Address (P.O. Box Number is	g of the following of the following	\$8.75 Fee I \$5.00 Added ax under s Agent  85 Zir anging its n s registered	Not Applicable Additional Required  May Be d to Fees 199.032,
25 ne and Address of Currer  N.H.  **1 FL 32960 risions of Sections 607,0500 or both, in the State of Flori cept the obligations of, Sections of reputet hazard of necessions age.	Suite, Apt. #, e 27 City & State 28 Zip 29 nt Registered Agent 2 and 607.1508, Florida Sida Such change was aution 607.0505, Florida State of the st	30 Statutes, thuthorized by	81 82 83 84 84 se abovo- y the corp	Name Street Addir City named corpor oration's boar	5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability Florida Statutes  10. Name and Address of Ne  ress (P.O. Box Number is Not Access ration submits this statement for the and of directors. I hereby accept the and when rensteting)	g of the following of the following	\$8.75 Fee I \$5.00 Added ax under s Agent  85 Zir anging its n s registered	Additional Required  May Be d to Fees 199.032,
25 ne and Address of Currer  N.H.  **1 FL 32960 risions of Sections 607,0500 or both, in the State of Flori cept the obligations of, Sections of reputet hazard of necessions age.	City & State  28  Zip  29  10  29  11 Registered Agent  2 and 607.1508, Florida State of C7.0505, Florida State of C7.0505	30 Statutes, thuthorized by	81 82 83 84 84 se abovo- y the corp	Name Street Addir City named corpor oration's boar	6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability Florida Statutes 10. Name and Address of Neress (P.O. Box Number is Not Acceptant authority of directors. I hereby accept the accept the acceptance of the resistency.	g of the following of the following	Fee f \$5.00 Added ax under s Agent  85 Zig anging its n s registered	Required  O May Be d to Fees 199.032,  D Code egistered offic agent. I am
25 ne and Address of Currer  N.H.  **1 FL 32960 risions of Sections 607,0500 or both, in the State of Flori cept the obligations of, Sections of reputet hazard of necessions age.	ZE ZIP ZSP  101 ZSP  102 ZSP  102 ZSP  103 ZSP  104 ZSP  105 ZSP  106 ZSP  107 ZSP	Statutes, th uthorized by tatutes.	81 82 83 84 84 se abovo- y the corp	Name Street Addir City named corpor oration's boar	Trust Fund Contribution  8. This corporation has liability Florida Statutes  10. Name and Address of Neress (P.O. Box Number is Not Accept ration submits this statement for the and of directors. I hereby accept the and when rensteting.	for intangible to Yes No No No Registered ptable)	Added ax under s  Agent  85 Zignanging its na s registered	d to Fees 199.032, D Code egistered officagent. I am
25 ne and Address of Currer  N.H.  **1 FL 32960 risions of Sections 607,0500 or both, in the State of Flori cept the obligations of, Sections of reputet hazard of necessions age.	Zip  24   Int Registered Agent  2 and 607.1508, Florida Sida Such change was aution 607.0505, Florida St.	Statutes, th uthorized by tatutes.	81 82 83 84 84 se abovo- y the corp	Name Street Addir City named corpor oration's boar	8. This corporation has liability Florida Statutes 22  10. Name and Address of Neress (P.O. Box Number is Not Accept ration submits this statement for the and directors. I hereby accept the and when rensteting)	for intangible to Yes No No Now Registered ptable)  FL purpose of chappointment as	Agent  85 Zig  anging its registered	0 Code egistered offic agent. I am
25 ne and Address of Currer  N.H.  **1 FL 32960 risions of Sections 607,0500 or both, in the State of Flori cept the obligations of, Sections of reputet hazard of necessions age.	24   nt Registered Agent  2 and 607.1508, Florida 3 ida Such change was au tion 607.0505, Florida St	Statutes, th uthorized by tatutes.	81 82 83 84 84 se abovo- y the corp	Name Street Addir City named corpor oration's boar	Florida Statutes  10. Name and Address of Ne ress (P.O. Box Number is Not Accept ration submits this statement for the and of directors. I hereby accept the and when reinsteting)	Yes No w Registered ptable)  FL a purpose of ch appointment as	Agent  85 Zig  anging its registered	o Code egistered offi agent. I am
N.H.  *** 1  FL 32960  resions of Sections 607.0500 or both, in the State of Floricept the obligations of, Sections of repute hazard of necessions age.	nt Registered Agent 2 and 607, 1508, Florida 3 ida Such change was au tion 607,0505, Florida St	Statutes, th uthorized by tatutes.	81 82 83 84 94 hie above- y the corp	Street Addr City named corpor poration's boar	10. Name and Address of Ne ress (P.O. Box Number is Not Accept ration submits this statement for the and of directors. I hereby accept the and when rensteting.	ptable)  FL purpose of chappointment as	85 Zig anging its n s registered	egistered offi agent. I am
FL 32960 distions of Sections 607.0502 or both, in the State of Floricept the obligations of, Section of reputational of necessions against the protection of the section against the control of the section against the sec	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	83 84 ne above- y the corp	Street Addr City named corpor poration's boar	ration submits this statement for the and of directors. I hereby accept the and when reisleting	FL purpose of ch appointment as	anging its registered	egistered offi agent. I am
FL 32960 distions of Sections 607.0502 or both, in the State of Floricept the obligations of, Section of reputational of necessions against the protection of the section against the control of the section against the sec	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	83 84 ne above- y the corp tystered Apo	City named corpor loration's boar	ration submits this statement for the and of directors. I hereby accept the and when reisleting	FL purpose of ch appointment as	anging its registered	egistered offi agent. I am
FL 32960 disions of Sections 607.0502 or both, in the State of Flori dept the obligations of, Sect and expended name of registrical ages	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	83 84 ne above- y the corp tystered Apo	City named corpor loration's boar	ration submits this statement for the and of directors. I hereby accept the and when reisleting	FL purpose of ch appointment as	anging its registered	egistered offi agent. I am
risions of Sections 607.0502 or both, in the State of Flori cept the obligations of, Sect ader proteinance of registering ager	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	84 ne above- y the corp ignificant Age	named corpor oration's boar	ird of directors. I hereby accept the and when reinstating)	purpose of ch appointment as	anging its registered	egistered offi agent. I am
or both, in the State of Flori cept the obligations of, Sect ederproteinanceling constages	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	ne above- y the corp nuclered Ago	named corpor oration's boar	ird of directors. I hereby accept the and when reinstating)	purpose of ch appointment as	anging its registered	egistered off agent. I am
or both, in the State of Flori cept the obligations of, Sect ederproteinanceling constages	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	y the corp igstered Ago	ioration's boar	ird of directors. I hereby accept the and when reinstating)	purpose of ch appointment as	anging its n s registered	agent. I am
or both, in the State of Flori cept the obligations of, Sect ederproteinanceling constages	ida Such change was au tion 607.0505, Florida St Lanktik if appicable	uthorized by tatutes.	y the corp igstered Ago	ioration's boar	ird of directors. I hereby accept the and when reinstating)	appointment as	s registered	agent. I am
						OFFICERS AND		
	DELETH	Æ	1. 1 TITLE		7,551110710701711102070		Change	☐ Addition
JAMSON, W.H.			1 2 NAME					
3 U.S. HWY. 1			1.3 STREE	ADDRESS				
O BEACH FL			14 CITY-5	ST- ZIP			<b>—</b>	
IALICON DODOTHY A	DELETO	t	2 1 TITLE			Į	Change	Addition
Liamson, Dorothy A 3 U.S. Hwy. 1	•		2.2 NAME	1000000				
O BEACH FL			23 STREE	ADDRESS				
J DENOTT E	T DELET	E	3 1 TITLE	01-211	· · · · · · · · · · · · · · · · · · ·		Change	Addition
JAMSON, W.H.,IV			3.2 NAME			•	-	
S U.S. HWY. 1			33 STREE	F ADDRESS				
O BEACH FL			34 CITY-5	ST - ZiP				
	DELETI	ŧ	4 1 TITLE			Į	Change	Addition
JAMSON, DAVID H.			4.2 NAME					
U DENOTITE	☐ OFLETI	E		ol - Zir.			Change	☐ Additio
	_ 555511		5 2 NAME					
				ADDRESS				
							<u> </u>	
	DELETI	t -	6 1 TITLE				Cnange	Addition
			6 2 NAME					
			63 STREE	I ADDRESS				
		-ll - <b>6</b>	6 4 CHY-1	ST-ZIP	for the avagation stated in Coation	110 07/0/IA FI	orida Etat d	toe I further
	U.S. HWY. 1 D BEACH FL	D BEACH FL	DELETE  DELETE  DELETE	DEEACH FL  4.4.CITY-5 5.1 THLE 5.2 NAME 5.3 STREET 5.4 CITY-5 6.1 THLE 6.2 NAME 6.3 STREET 6.4 CITY-1 1. The information supplied with this filing is voluntarily furnished and doe	DEACH FL  4.4 Gity-S1-ZiP  5 1 Title 5 2 NAME 5 3 SIREH ADDRESS 5 4 Gity-S1-ZiP  DELETE 6 1 Title 6 2 NAME 6 3 SIREET ADDRESS 6 4 City-S1-ZiP  If the information supplied with this filing is voluntarily furnished and does not qualify	DELETE  4.4 CITY-ST-ZIP  5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP  6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  with the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section action indicated and this arguest errord or supplemental applied and does not qualify for the exemption stated in Section action indicated on this arguest errord or supplemental applied and does not qualify for the exemption stated in Section	DELETE 4.4 CITY-ST-ZIP  5 1 THLE 52 NAME 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 6 1 THLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP  WI the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), FI	DELETE 4.4.CHY-ST-ZIP    DELETE   5 1 THLE

W.H. Williamson 2/26/96 (407) 567-5272