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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 520943

(2)

WILLIAMS & SHAD, P.A.

SIGNATURE:

FILED
Jan 16 1997 8:00am
Secretary of State



MA FART RAV	ce of Business	Mailing Address				I IRBEON DENIO HON DONCE FOUND DINCED IN	ii dibii atasi t	illit genet ütüt	
233 EAST BAY STREET SUITE 601 JACKSONVILLE FL 32202-0449		233 EAST BAY STREET SUITE 601 JACKSONVILLE FL 32202-3449							
					l l				
ANONOMINIEE	TC SZERCOTO	SHOROGIVILLE PE SEAR				3. Date Incorporated or Qualified 12/21/1976		ate of Last F 01/1996	Report
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26	····			59-1706455	·	N	ot Applicable
Suite, Apt	# etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27]							equired
City & Star	tie .	City & State				6. Election Campaign Financing	r=-1		May Be
23 Zip	Country	28 Zip	Col	untry		Trust Fund Contribution	- !		to Fees
24	25	29	30	Ci ili y		This corporation has liability for Florida Statutes	Yes		199.032,
	9. Name and Address of Curre		[30]	Τ-		10. Name and Address of New F			
WILL	LIAMS, ROLAND E JR			81	Name				
	E BAY ST BLACKSTONE BLDG	ı		100	6	CO D. M. H. H. M. M.	- 1-1		
	KSONVILLE FL 32202			82	Street Add	ress (P.O. Box Number is Not Accept	able)		
0710	1001111000100000			63					
								···	
				84	City	•	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	tutes, the a	above-	named cor	poration submits this statement for the	purpose o	of changing	its registered
	registered agent, or both, in the Stat am familiar with, and account the obli-				the corpora	tion's board of directors. I hereby acc	ept the ap	pointment as	registered
SIGNATURE		.,							
SIGNATURE	Signation typed or purclea with earlier earlier	gent and the if applicable (N	NOTE Registere	ed Agen	l signeture regu	red when reinstating)	DATE		
	,			00 . ig					
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN		RS IN 12
12. THE	DP	ND DIRECTORS DELETE					ICERS AN	D DIRECTO	
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information indicated on this argued sport or supplemental and an all 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 proration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name