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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

FNT # 527026

(0)

1. Corporation RICHAR	NE:N 1 # 527920 ID PRENTISS INC.	(0)			
Principal Place	of Business	Mailing Address		I LOBERDY BELLO HAVE TOBER TOTAL HOUR	NALL ATEST BIRIT STATE BEST SERVE DISTE TOST
250 BRADLEY #508		250 BRADLEY PLACE #508			
PALM BEACH FL 33480 US		PALM BEACH FL 33480 US		3. Date Incorporated or Qualified	3a. Date of Last Report
US		03		03/16/1977	04/11/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		13-5659042	Not Applicable
Suite, Apt. #	r, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	[29]	30	Florida Statutes Yes	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
DOCUMBO	e Mouado I				
	S, FIICHARD J. Titr ave ≢11 4		82 Street Ad	SHARD PRENTISS AME	·le)
	ACH FL 33480		83 25	O BRADLEY PLACE # 508	
I ALIII DE	ACTIVE GOTOU		PA PA	LM BEACH, FL 33480	
			84 City		FL 85 Zip Code
12.	Styniature typed or printed name of registered agent ar OFFICERS AND	DIRECTORS	IOTE: Registered Agent signature required	when reinstating ADDITIONS/CHANGES TO OFF	
TITLE	СОВ	☐ DELETE	1.1 TITLE		Change Addition
NAME	PRENTISS, RICHARD J		1.2 NAME		
STREET ADDRESS	250 BRADLEY PLACE #508 PALM BEACH FL		1.3 STREET ADDRESS		
City-St-ZiP	PD SS	DELETE	1.4 CITY - ST - ZIP 2. 1 TITLF		☐ Change ☐ Addition
NAME	PRENTICE, RICHARD J	~	2.2 NAME		
STREET ADDRESS	250 BRADLEY PLACE #508		2 3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL		2 4 CITY - ST - ZIP		
TITLE	DS	☐ DELETE	3. 1 TITLE		. Change Addition
TANKE	WILLIS, JOSEPH		3 2 NAME		
STREET ADDRESS	505 SOUTH FLAGLER DRIVE		3.3 STREET ADDRESS		
CITY-ST-7IP	WEST PALM BEACH FL	☐ DELETE	3.4 CITY-ST-ZIP 4. 1 TITLE		Change Addition
TITLE NAME		E Dece ie	4.2 NAME		E change E Madician
STREET ADDRESS			4.3 STREET ADDRESS		
CHTY-ST-ZIP			4.4 C(TY-ST-Z)P		
THILE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Filmerer	5.4 C(TY-ST-Z)P		ET Observe ET NAME
TITLE		☐ DELETE	6 1 TIFLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
14. I do hereby	y certify that the information supplied wi	th this filing is voluntarily fur	64 CHY-SI-ZIP rnished and does not qualify for	or the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further
certify that oath; that I	the information indicated on this annual am an officer or director of the corpora Block 12 or Block 13 if changed, or on	I report or supplemental an ition or the receiver or trust	inual report is true and accurat tempowered to execute this	le and that my signature shall have the	same legal effect as if made under