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

FROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

	JAL REPORT 1996		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					
DOCUI 1. Corporation	MENT#	533743	(1)					
		Y & WHITAKER, CHA	ARTERED					
	,, , , , , , , , , , , , , , , , , , , ,		***************************************					
Principal Place of Business		Mailing A	Mailing Address				'A 1401 AIAII A£A11 AIA41 AI	1811 919 11 6 3911 398 1
2400 MANATEE AVEW. P.O. BOX 1519 BRADENTON FL 34205		P.O. E	2400 MANATEE AVEW. P.O. BOX 1519 BRADENTON FL 34205					
						 Date Incorporated or Qualified 05/16/1977 	3a. Date of Last 02/02/1	
2. Principal Pla	ace of Business	2a. Malir	ng Address			4. FEI Number	00,00,	Applied For
21		26				59-1742155		Not Applicable
Suite, Apt. (Suite, Apt. #, atc 22		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	75 Additional e Required
Oty & State	;	City 8	State			Election Campaign Financing Trust Fund Contribution		00 May Be
Z(p)	Count			Country		8. This corporation has liability for i	AUC	s 199.032,
24	25 25 Name and Addr	29 ess of Current Registered	Anont	[30]		Florida Statutes Yes 10. Name and Address of New R		
	5. Name and Addi	ess of Corrent negistered	Agent	81	Name	IU. Name and Address of New H	egistered Agent	
PRICE,	L. FLOYD			82	Street An	odress (P.O. Box Number is Not Acceptab	(a)	
	ANATEE AVE.,W.				00000000	wiress in . C. Box Humber is Not Acceptab		
BRADEI	NTON FL 34205			83				
				84	City		FI 85	Zip Code
11. Pursuant t	o the provisions of Sec	ions 607.0502 and 607.1508	B, Florida Statutes	s, the above r	amed corp	poration submits this statement for the pur-		s registered office
or register familiar wit	ed agent, or both, in the th, and accept the oblig	 State of Florida. Such chang ations of, Section 607.0505, 	ge was authorize Florida Statutes.	d by the corpo	oration's bo	poration submits this statement for the purporation of directors. I hereby accept the apporation	pintment as registere	ed agent. I am
SIGNATURE:								
12.		of registered agent and title if applicable OF FICERS AND DIRECTORS		L. Registered Agen	signature requ	ired when reinstating: ADDITIONS/CHANGES TO OFFI	DATE	ÎORS IN 12
DILE	PTD DELETE			1 1 TITLE				e
NAME	PRICE, L. FLOY			1.2 NAME				}
STREET ADDRESS	6520 RIVERVIEW			1.3 STREET	ADDRESS			
City-St-ZiP	Bradenton Fl VSD		D SELEN	1.4 CHY-S 2.1 TITLE	- ZiP			
TITLE .	PRICE, DALE L.		DELETE				☐ Change	e 🔲 Addition
NAME STREET ADDRESS	3912 16TH AVE	W		2 2 NAME 2 3 STREET	1DD0100			
CHY SI-ZIF	BRADENTON FL		2 4 CITY-S					
HLE	DELETE		DELETE	3. 1 TiTLE			Change	e 🖺 Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3. STREET	ADDRESS			
CHTY - ST - ZIP				3.4 CITY-S	r- Z IP			
TIFLE			DELETE	4.1 TITLE		•	☐ Change	e 🔲 Addition
NAME				4.2 NAME				
STREET ADDRESS				4.3 STREET				
CHY SI ZIF	· · · · · · · · · · · · · · · · · · ·		DELETE	4.4 CITY - S	I - ZIP		Chana	a Fill Addition
NAMi			Place	5 1 TITLE 52 NAME			☐ Change	e 🛅 Addition
STREET ADDRESS				5.7 NAME 5.3 STREET	Annesss			
City St Zif				5 4 CiTY - S				
TIBLE			DELE 1E	6 1 TiTLE			☐ Change	e Addition
MAVE				6.2 NAME				_

14. Ldo hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report of supplier ental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the compretation of th

6 4 CITY-ST-ZIP

6.3 STREET ADDRESS

STREET ADDRESS.

CITY - ST-ZIE