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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scoretary of State

DIVISION OF CORFORATIONS

1996

Corporation AVALC		# 53694 STRIES INCORPO	•	,			A MANDA BINDA HAND BINDE KEKIN DI		AHAH BIA	
incipal Place of Business P.O. BOX 702 BAGDAD FL 32530			Mailing Address P.O. BOX 702 BAGDAD FL 32530						 	
							3. Date incorporated or Qualified 06/10/1977	3a. Date of 06 /	Last R 04/19	- F
Principal Pla	of Busine	38	2a. Mailing Addres	s	•		4. FEI Number			Applied For
Suite, Apt. #, etc. City & State			26				59-1750807		Not Applicable	
						5. Certificate of Status Desired		\$8.75 Additional Fee Required		
							6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be
Zφ:		Country 7ip 25 29		h n	Country 30		8. This corporation has liability for intangible tax under s 199.032 Florida Statutes			
	L.	and Address of Curren	mand at any contract of the co				10. Name and Address of New F	_	ent	
					81	Name		<u> </u>		
	n, raymo				82	Street Add	lress (P.O. Box Number is Not Acceptat	ole)		
6520 YI MILTON	ELLOW HIL	L DRIVE			83					
MILTUN	I FL				53					
					84	City		FL '	B5 Zip	o Code
familiar wit	n, and accep	ooth, in the State of Florid tithe obligations of, Secti	ia. Such change was au	itnonzed by ti	above-r the corp	named corpo oration's boa	ration submits this statement for the purard of directors. I hereby accept the app	rpose of changi ointment as reg	ing its r jistered	egistered offi i agent, I am
familiar with	т, апо ассер	ioan, in the State of Hond	on 607.0505, Florida St conformation the control of	(NOTE Reget	tered Agen	oration's boa	ration submits this statement for the purific of directors. I hereby accept the appoint which reinstating. ADDITIONS/CHANGES TO OFF	ointment as reg	istered	RS IN 12
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SIGNATURE: Raymond O. Worden

1/29/96 904-646-8994