## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 545137

(2)

GROVER ROBINSON & ASSOCIATES, INC.

BOD N REUS STREET, SUITE 8-8 PENSACOLA FL 3200 SOFT  2. Finicipal Place of Qualmes  2. Mining Activess  2. Mining Activess  2. Mining Activess  Suite, April R, etc.  Suite, April R, etc.  Suite, April R, etc.  Suite, April R, etc.  City & Shirt  Zor  City & Shirt  Zor  City & Shirt  Zor  City & Shirt  Zor  Zor  Zor  Zor  Zor  Zor  Zor  Z									<i>iii</i>	1 <b>6 16 17 18 6</b> 2
PENSACOLA FL 2201 PROPOSED COUNTRY 2. Principal Place of Business 2. Mining Andreas 3. Date the Carposition of South East Report  09/14/1977 3. Date the Completion of South East Report  09/14/1977 3. Date the Completion of South East Report  09/14/1977 3. Date the Completion of South East Report  120	•		Mailing Address						Jet 61561 61614	,
Principal Place of Business   2a   Mailing Activess   4. ELI Number   59-1769266   Apprect   721   Apprect   722   Suite, April 4, inc.   25   Suite, April 4, inc.   25   Suite, April 4, inc.   25   Suite, April 4, inc.   27   Suite, April 4, inc.   28										
Sulfo, Apl #, ofc.    Sulfo, Apl #, ofc.   25   Sulfo, Apl #, ofc.   27   Caly & Status   28   Sulfo, Apl #, ofc.   27   Caly & Status   28   Sulfo, Apl #, ofc.   27   Caly & Status   28   Sulfo, Apl #, ofc.   28   Sulfo, Apl							· ·	ι		Report
Suite, April #, efe.    State	2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address						pplied For
City & State   City & Country   29   30   Country   29   30   Runs frund Condition   Adapted to Feed   Adapted to Feed   Runs from the City of property   Country   29   30   Runs frund Condition   Robinston   City & Country   29   30   Runs from the City of property   Runs from the City of property   Runs from State   City & City & Name   Robinston   City &		4 10					59-1769266			lot Applicable
City & State  28  Zip  Country  Zip  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	<b>—</b>	#, BIC.		1			5. Certificate of Status Desired			
23   29   Country   7th   Country   8. This corporation has liability for lawfall-lack under 6. 199.0.		e					6. Election Campaign Financing			
Zip Country Zip Boll State	23		28	28						
ROBINSON, GROVER C.  80 N. REUS ST. SUITE 88 PENSACOLA FL 32501  82 Strock Address (F.O. Box Number is Not Acceptable)  84 City FL 85 Zin Code  85 Strock Address (F.O. Box Number is Not Acceptable)  86 City FL 85 Zin Code  87 City FL 85 Zin Code  88 City FL 85 Zin Code  88 City FL 85 Zin Code  89 City FL 85 Zin Code  99 City FL 85 Zin Code  90 City FL 85 Zin Code		Country	harana harana				8. This corporation has liability for i	n <b>y</b> ingible t	ax under t	s. 199.032,
ROBINSON, GROVER C.  80 N. REUS STSUITE 88 PENSACOLA FL 32501  82 Strock Address (F.O. Box Number is Not Acceptable)  83 C.  84 Strock Address (F.O. Box Number is Not Acceptable)  85 Strock Address (F.O. Box Number is Not Acceptable)  86 Strock Address (F.O. Box Number is Not Acceptable)  87 Strock Address (F.O. Box Number is Not Acceptable)  88 Strock Address (F.O. Box Number is Not Acceptable)  89 Control of Co	24			30						
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PENSACOLA FL 32501  68  67  68  68  68  68  68  68  68  68					81	Name				
B8				Ì	82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
Section   Sect	PEN	ISAÇOLA FL 32501		-	02					
11. Pursuant to the properties of Sections 607 0500 among 2,1508, Floridin Statutes, the above named corporation subraits his statement for the purpose of changing its regist office or registers of many above, in the Star of Floy it Such change was authorized by the corporations subraits his statement for the purpose of changing its regist office or registers of many above, in the Star of Floy its Such change was authorized by the corporations theart of directors. Thereby accept the appointment as register agent. I am familiar the purpose of changing its register agent. I am familiary the purpose of changing its register agent. I am familiar the					63					
1. Pursuant to the proposed a Sections 607 05/30 per city 1008. Florida Statutes be above named corporation submits his statement for the purpose of changing its regist office or register appear both in the State of Host Such change was nationated by the corporation's broad of directors. Thereby accept the appointment as registed agent. I am familiar for the state of Host Policy and Such change was nationated by the corporation's broad of directors. Thereby accept the appointment as registed agent. I am familiar for the state of Host Policy accept the appointment as registed agent. I am familiar for the purpose of changing its scale of Change agent. I am familiar for the purpose of changing its scale of Change agent. I am familiar for the purpose of changing its scale of Change agent. I am familiar for the purpose of changing its scale of Change agent. I am familiar for the purpose of changing its scale of Change agent. I am familiar for the purpose of changing its registed agent agent. I am familiar for the purpose of changing its registed agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I am familiar for the purpose of Change agent. I agent a					84	City		EI	<b>85</b> Z(p)	Code
SIGNATURE	11. Pursuant	to the providence Sections 607 050	02.and-607.1508. Florida Sta	tutes the at		named corr	poration submits this statement for the n		L. J	its registered
SIGNATURE	office or re	egistere a entage both, in the Start	of Florda Such change wa	s authorized	l by	the corporat	ion's board of directors. Thereby accep	the appo	intment as	s registered
12	· ·	Walnus IX	A - 4	rionda Stat	otos					
TITLE	SIGNATURE	Signature, yped or printed price of repetitived ag	int and title mapping the (N	MTE Registeres	Agei	i of signatare requir	ed when redistating)	IFAG		
NAME   ROBINSON, GROVER C.   12 MAME   1.3 STREET ADDRESS   1.4 CDT - ST - 2P   PENSACOLA FL   1.4 CDT - 2P   PENSACOLA	12.			13.		.i	ADDITIONS/CHANGES TO OFFIC			
STREET ADDRESS   880 N. REUS STREET 8-B   1.8 STREET ADDRESS   1.8 STR	TITLE		☐ DELETE	1.1 107	LF			l	☐ Change	Addition
CHY-ST-ZPP   PENSACOLA FL	NAME			1.2 NA	ME					
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NAME		PENSACOLA FL				T-716			···	
23 STREET ADDRESS   23 STREET ADDRESS   24 CDY: ST-ZIP   24 CDY: ST-ZIP   31 TDTC   31 TDTC   32 NAMI   32 NAMI   32 NAMI   33 STREET ADDRESS   34 CDY: ST-ZIP   34 CDY: STREET ADDRESS   35 STREET ADDRES	1		L. Dett de					l	Unange	Addition
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TITLE         DELETE         3.1 THT         Change         A.C.           NAME         3.2 NAMI         3.3 STHEFT ADDRESS         CITY-ST-ZIP         THE         Change         A.C.	1									
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DEFFE   34 CITY-SE-ZIP     DEFFE   41 TILLE     Change   AC   AC   AC   AC   AC   AC   AC   A						ADDRESS				
DELITE						1				
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A CHY-ST-ZIP	NAME			4. 2 N/	Mi	1				
TITLE         DELETE         5.1 HEF         Change         AC           NAME         5.2 NAME         5.2 NAME         CHY-ST-ZIP         5.4 CHY-ST-ZIP         CHY-ST-ZIP         Change         CHY-ST-ZIP         Change         CA         CHY-ST-ZIP         Change         CA         CHY-ST-ZIP         Change         CA         CHY-ST-ZIP         Change         CA         CHY-ST-ZIP         Change         CHY-ST-ZIP	STREET ADDRESS			4.3 ST	REET.	ADDRESS				
NAME         52 NAME           STREET ADDRESS         53 STREET ADDRESS           CITY-S1-ZIP         54 CITY-S1-ZIP           TITLE         DEFIE         61 TiTLE           NAME         62 NAME           STREET ADDRESS         63 STREET ADDRESS	CITY-ST-ZIP			4.4 CII	Y - \$1	I - ZIF				
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	NAME			G.2 NA	ME					
0.00 mm	1	1		6351	Ritt	ADDRESS				
	CITY-ST-ZIP									
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual peper or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath I am an officer or director of the proportion or the receiver of true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	informatio	n indicated on this annual•zenorl or :	supplemental ăimual report i	s true and a	cou	rate and that	my signature shall have the same legal	effect as i	if made un	ider oath. That