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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 578075

(4)

FILED May 02 1997 8:00am Secretary of State

Principal Piac 610 B ROYAL SULF PORT FI		Mailing Address 1610 B ROYAL PALM DR. GULF PORT FL 33707-3830 US	-			
				 Date Incorporated or Qualified 06/30/1978 	3a. Date of Last 02/15/1996	,
2. Principal F	Plane of Business	2a. Mailing Address		4. FEI Number		Applied For
וו		26		59-1831403		Not Applicable
Suite, Apt	#, etc	Suito, Apt #, etc.		5. Certificate of Status Desired	□ \$8.75	Additional Regulred
City & Sta	de	City & State		6. Election Campaign Financing		May Be
ปี		28		Trust Fund Contribution		d to Fees
<i>Z</i> ip	Country	Zip	Country	8. This corporation has liability fo	r intangible tax under	s 199.032,
1	25		30		Yes No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	legistered Agent	·
	vis, judith ann		81 Name			
	0 B ROYAL PALM DR S		82 Street Add	dress (P.O. Box Number is Not Accepta	able)	
GUL	LFPORT FL 33707					
			83			
			84 City		85 Zir	p Code
					FL " "	
DOWN TAIR OF BOAT				rporation submits this statement for the ation's board of directors. I hereby acc		
i2.		port and rate If applicable. (NOTE	Registered Agent signature req.		DATE FICERS AND DIRECTO	ORS IN 12
2. Tt i	OFFICERS AN	goot and title If applicable. (NOTE	Hingistered Agent signature required. 13. 1.1 TFLE	uired when reinstaling)	DATE	ORS IN 12
12. ITLI AME	OFFICERS AN PD DAVIS, JUDITH ANN	port and rate If applicable. (NOTE	13. 1.1 TIFLE 1.2 NAME	uired when reinstaling)	DATE FICERS AND DIRECTO	ORS IN 12
12. Till Ame Tree I adoress	PD DAVIS, JUDITH ANN 1610 B ROYAL PALM DR SO	port and rate If applicable. (NOTE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	uired when reinstaling)	DATE FICERS AND DIRECTO	ORS IN 12
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Information indicated on this annual report or supplemental annual 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 corporation or the receiver or truslee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with appears in Block 12 or Block 13 if changed.

SIGNATURE: