CORF ANNU/	IOW: FILING FEE AFTER MAY 1ST IS \$550.00OFIT DRATION L REPORT08		STATE	Feb 23 1998 8:00an Secretary of State					
rincipal Place of	ST REAL ESTA	M	(9) ailing Address 201 SOUTH WASHING	TON AVE					
TITUSVILLE FL 32780 TITUSVILLE FL 32780						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/11/1978			
2. Principal Place of Business		28.	2a. Mailing Address			4. FEI Number Applied F			
Suite, Apt. #,	elc.	26	Suite, Apt. #, etc.			59-0883124			t Applicable Additional
		27				5. Certificate of Status Desired		Fee Re	
City & State		28	City & State			<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		\$5.00 Added 1	May Be to Fees
Zip	Count	try	Zip	Country		8. This corporation owes or has p	aid the current	year Int	angible
<u> </u>	25 9. Name and Addr	29 ess of Current Regis	tered Agent	30		Personal Property Tax due Jun 10. Name and Address of New R			No
	WILLE FL 32780			83 64	City		۴L	· ·	Code
1. Pursuant to office or reg agent. I am	the provisions of Sei istered agent, or bol familiar with, and ac nature typed or printed nam	in of registered agent and title	il applicable. (NC	B4 utes, the above authorized by lorida Statutes	-named cor the corpora	rporation submits this statement for the ation's board of directors. I hereby acco ured when reinstating)		· ·	
1. Pursuant to office or reg agent. I am IGNATURE Sk 2.	the provisions of Soci istered agent, or bol familiar with, and ac nature, typed or printed name		il applicable. (NC CTORS	B4 authorized by Florida Statutes. D1E: Registered Ager 13.	-named cor the corpora		PL purpose of cha apt the appointr DATE CERS AND DIF	anging It ment as	s registered registered S IN 12
1. Pursuant to office or reg agent. I am IGNATURE 2. TLE AME IREET ADDRESS	the provisions of Sec istered agent, or bol familiar with, and ac nature typed or printed nam ( PST DEFOREST, CAR 2579 CHERRYWO	In of registered agent and tile DFFICERS AND DIREC	il applicable. (NC	B4 utes, the above s authorized by Florida Statutes. DIE: Registered Ager 13. 1.1 TILE 1.2 NAME 1.3 STREET /	-named cor the corpora * signature requi	uired when reinstating)	PL purpose of cha apt the appointr DATE CERS AND DIF	anging it ment as	s registered registered S IN 12
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1. Pursuant to office or reg agent. I am IGNATURE 2. TLE AME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS INF. ST-ZIP	the provisions of Sec istered agent, or bol familiar with, and ac nature typed or printed nam ( PST DEFOREST, CAR 2579 CHERRYWO	In of registered agent and tile DFFICERS AND DIREC	I applicable. (NC CTORS DELETE	B4       uttes, the above       authorized by       Torida Statutes       11 Tifle       12 NAME       13 STREET /       14 CITY-ST       2.1 Tifle       2 NAME       3.1 Tifle       2.1 STREET /       2.2 NAME       3.3 STREET /       3.1 Tifle       3.2 NAME       3.3 STREET /       3.4 CiTY-ST       4.1 Tifle       4.2 NAME       4.3 STREET /	ADDRESS	uired when reinstating)	DATE	RECTOR Change	s registered registered S IN 12 Addition
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