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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANI	JAL REPORT Secretary of Sta 1997 DIVISION OF CORPOR			Secretary of State			
	JMENT # 598170 IINGTON, INC.) (9)			I IDECEL ACINO CANOL PAROL CIAM CRAN BACK	RAM ALAN ALAN AMIN BIBU ALAN MALI	
Principal Place of Business Mailing Address 10601 BELCHER ROAD SOUTH 10601 BELCHER ROAD SO LARGO FL 34647-1415 LARGO FL 33777-1407							
US	1917-1913	US	•		3. Date Incorporated or Qualified 12/21/1978	3s. Date of Last Report 04/16/1996	
2. Principa 21	d Place of Business	28. Mailing Addres	i\$		4. FEI Number 59-1872429	Applied For Not Applicable	
Suite, A	pt. #, etc	Suite, Apt #, e	tc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & S	itate	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	30 Co.	untry	8. This corporation has liability for Florida Statutes 10. Name and Address of New Re	Yes No	
ST	 Name and Address of Curr ROHAUER, GARY N. 	ent registered Agent		81 Name	(Q. Hamb and Addies of the five	Sieroen Gelit	
ALC DOCK OT				82 Street Address (P.O. Box Number is Not Acceptable)			
	SUITE #A				83		
CLEARNIATER, FE SE FE STOTS							
				64 City		FL 85 Zip Code	
		502 and 607.1508, Florida te of Florida. Such change igations of, Section 607.05	Statutes, the a was authorize 505, Florida Sta	bove-named co id by the corpor tutes.	orporation submits this statement for the praction's board of directors. I hereby access	purpose of changing its registered of the appointment as registered	
SIGNATUR	RE Signature Rywood to printed marvie of registerions	sjent and title II applicable	(NOTE: Flegistere	d Agent signature rec	quired when reinstating)	DATE	
12.	The second secon	ND DIRECTORS DELE	13.	T. 5	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition	
TITLE	P Waters, Burt	i nere	TE 1.1 TI	· .		71	
STREET ADDRE	THE REPLACED BUILD AND	Н		TREET ADDRESS		\\ \\ \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
City-St-Zift	NORTH REDINGTON BEACH			ITY-ST-ZIP		• <u>•</u>	
TIFLE	VP	DELE	1	1		Change	
NAME	DENSMORE, BETH	100	2.2 N	· · · · · · · · · · · · · · · · · · ·			
STREET ADDRE	S 2485 NORTHSIDE DRIVE #19 CLEARWATER FL	vu	L i	TREET ADDRESS	· ·		
CITY - ST - ZIP	10	DELE	76 247	CITY-ST-ZIP			
NAME	U	L.J VELC	: [1] 3.1 7	ITLE		Change Addition	
	CASEY, PAULA R.	[] DELC	3.1 F	i		Change Addition	
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6/17/-ST-ZP

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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if phanged or on an attachment with an address.

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/97

(83) 544-6800

FILED

Apr 14 1997 8:00am

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