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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1997	Secreta DIVISION OF C	ry of Star CORPOR		Secret	ary c	of S	tate
DOCUN 1. Corporation	MENT # 603215	5 (5)						
MENTAL	TI AL OTODOTILLY THE							
Principal Place	e of Business	Mailing Address			-{			JH0H
503 PALM AVENUE 503 PALM AVENUE TITUSVILLE FL 32796 5537			,					
					3. Date Incorporated or Qualified 11/15/1971	3a. Date		port
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	06/11		plied For
н		26			59-2431949			t Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 A Fee Re	
City & State	9	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zφ	Country	Zip	Co	intry	8. This corporation has liability for			199.032,
24	9. Name and Address of Curre	29	30			Yes 🔲 I		
		int Hegistered Agent		81 Name	10. Name and Address of New Re	Signatelen Wil	ını	
	DSTILL (KENNETH A) 5 S. CARPENTER ROAD				(5 0 D. M. L	i i - s		
TITUSVILLE FL 32780				82 Street Addr	ress (P.O. Box Number is Not Acceptai	bie)		
1110	OTTOLE TO UNITED			83				. , , , , , , , , , , , , , , , , , , ,
				84 City			85 Zip C	Code
					poration submits this statement for the lion's board of directors. I hereby acce			
agent La SIGNATURE	rn familiar with and accept the other	gations of, Section 607.0505, Figeri and tills if applicable. (NOT	orida Sta E Registen	futes. ed Agent signature requir		413 DATE	0197	
12.	PSD OFFICERS AI	ND DIRECTORS DELETE	13.	TITLE T	ADDITIONS/CHANGES TO OFFI		Change	Addition
NAME	STUDSTILL, KENNETH A.			IAME			, - •	
STREET ADDRESS	503 PALM AVENUE		1,3 9	TREET ADORESS				
CITY-ST-ZIP	TITUSVILLE FL		1.4 (CITY-ST-ZIP				
TITLE		☐ DELETE	2.11				Change	Addition
NAME DESCRIPTION				AME				
STREET ADDRESS				CITY-ST-ZIP				
CHY-S1-ZIP TITLE		☐ DELETE		TITLE	7		Change	Addition
NAME			321	IAME				
STHEET ADDRESS	is		335	TREET ADDRESS				
COTY - S1 - 7IP		DELETE		CITY-ST-ZIP			1 600	- Laureina
THE		☐ DELETE	. 1	ITLE		L] Change	Addition
NAME STREET ADDRESS				name Treet address				
CITY-ST-ZIP				CHTY-ST-ZIP				
THE	VIII.	DELETE		ITLE		L	Change	Addition
NAME			5.21	NAME				
STREET ADORESS		•	5.3 3	STREET ADDRESS				
CITY-ST-7IP		T NEI ETE	_	CITY-ST-ZIP			Change	Addition
THILF		☐ DELETE		TITLE NAME		L] Change	MODITION
NAME STREET ADDIRESS				STREET ADDRESS				
CITY-ST-ZIP				CITY-ST-ZIP				
14. Udo barel	by certify that the information suppli	ied with this filing does not qual	lify for the	exemption state	d in Section 119.07(3)(i), Florida Statuti	es. I further co	ertify that	the
l am an o	on indicated on this annual report or flicer or director of the corporation in In Block 12 or Block 13 if changed,	or the receiver or trustee empor	wered to	execute this repo	t my signature shall have the same leg rt as required by Chapter 607, Florida	ai ellect as if Statutes; and	that my n	ame

SIGNATURE:

FILED

May 12 1997 8:00am