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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DIVISION OF COR					SNC	Beere	ary or state
	MENT # 63° SE T. V., INC.	1985	(9)			T MARINA BUILD SUINT WHILE TERM HEIRE B	IN BIBIN BIBU BRAK BIBW BIBN GGU 1881
Principal Plac 101 W PLANT WINTER GARD	STREET	101 1	Mailing Address 101 W PLANT STREET WINTER GARDEN FL 34787-3142				
						3. Date Incorporated or Qualified 08/06/1979	3a. Date of Last Report 05/01/1996
	Place of Business	26. N	Mailing Address			4. FEI Number 59-1939119	Applied For Not Applicable
Suite, Apt	#, etc		Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional
City & Stat	6	27	City & State			6. Election Campaign Financing	Fee Required \$5.00 May Be
23		28	·			Trust Fund Contribution	Added to Fees
Zip 24	Gountry 25	29	ip.	Country 30	′	This corporation has liability to Florida Statutes	or intangible tax under s. 199.032,
24	9. Name and Address		red Agent	130		10. Name and Address of New I	
	DIFF, DENNIS M.			61	Name		
	PAGE ST. Iter garden, Fla	- Oel	-	82	Street Add	ress (P.O. Box Number is Not Accept	able)
	ANDO FL 32806	Vel	ue	83	ļ		
				B4	City	-,	■■ las Zip Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. Familiar with, and accept the obligations of, Section 607.0505, Florida S 					e named corr	oration cultimite this statement for the	FL To Lip coo
office or a	registered agent, or both, initiativity and accor-	in the State of Florida of the obligations of !	. Such change was Section 607 0505. F	authorized by	y the corporal	tion's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE	in i	of the conguitoris of	001.000,1	iorida Ciataio			
12.	Signature, typed or printed name of	Pregistered agent and title if I		OTE: Registered Ap	eni signature requi	red when reinstating) ADDITIONS/CHANGES TO GET	DATE ICERS AND DIRECTORS IN 12
1:TLF	STD		DELETE	11 TITLE	I	ADDITION OF THE OFFI	Change Addition
NAME	ENCINIAS, JOANNE	M.		1.2 NAME			
STREET ADDRESS	1409 KIMBERLY ST. OCEE FL.			1.3 STREE	I ADDRESS		
TITLE	VO		DELETE	1.4 CITY - 1 2.1 TITLE	ST-ZIP		Change Addition
NAME	TARDIFF, DAVID R		Can bearing	2.2 NAME			Last official and a second of the second of
STREET ADDRESS	521 BREIMON				T ADDRESS		
Crity-St ZIP	SUN VALLEY NV			2.4 CITY-	ST-ZIP		
TITLE NAME	PD TARDIFF, DENNIS M		DELETE	3.1 TITLE 3.2 NAME			Change Addition
STREET ADDRESS	230 PAGE ST.	•			ADDRESS		
CITY-S1-ZiP	ORLANDO FL			3 4. CITY-			
1:1LE			☐ DELETE	4.1 TITLE			Change Addition
NAME CAREEL ADDRESS OF				4.2 NAME			
STREET ADDRESS CITY+ST-ZIP				4.4 CITY -	T ADDRESS		
TITLE			DELETE	5.1 TITLE	7,		Change Addition
NAME:				5.2 NAME	1		
STREET ADDRESS	ļ				T ADDRESS		
CITY+ST-ZIP TITLE			DELETE	6.1 TITLE	51 - ZIP		Change Addition
NAME.			<u> </u>	6.2 NAME	1		
STREET ADORESS				6.3 STREE	T ADDRESS		
I	1				or 200		

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 changed, or on an attachment with an address.

SIGNATURE:

MATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-97

4076565986

vt·me Phone #

FILED

Apr 25 1997 8:00am

Secretary of State