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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS		Secretary of State				
	MENT # 652907	(7)				
MILNE &	BUCKINGHAM, P.A.			b indiala kilas della likia adali adali adali	Bidit setti didi. aigir bidir	
Principal Place	of Business	Mailing Address			BYAN DIDIE ANDN DIAN BYDN	
4595 LEXINGTON AVENUE JACKBONVILLE FL 32210		4595 LEXINGTON AVE. JACKSONVILLE FL 32210-2058				
				3. Date Incorporated or Qualified	3a. Date of Last R	eport
2. Principal Pla	nce of Rusiness	2a. Mailing Address		01/21/1980 4. FEI Number	03/28/1996	
11]	io de Dodinio do	26		59-2037329		plied Fo of Applica
Sulte, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	
2		27	···	6. Certificate of Status Desired	Fae Re	quired
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Added	to Fees
Zip 14	Country 25	Zip	Country 30	8. This corporation has liability for i	ntangible tax under s Yes 🏻 No	. 199.032
	9. Name and Address of Curren		su	10. Name and Address of New Reg		
MALINE	E, DOUGLAS J	<u>-</u>	81 Name			
	LEXINGTON AVENUE		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
JACK	SÖNVILLE FL 32210					
T.			83			
			84 City		B5 Zip (Code
	the provisions of Sections 607 050; gistered agent, or both, in the State familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo		poration submits this statement for the pation's board of directors. I hereby accept	PL	
SIGNATURE S	opalure, typed or printed name of registered ago	ot and title if applicable (NOT)		неd w'юл (enstaterg)	urpose of changing it at the appointment as	s register register
SIGNATURE S	OFFICERS AND	ot and title if applicable (NOT)	s, the above-named cor ulthorized by the corpora ida Statutes. Registered Agent signature req.		urpose of changing it at the appointment as	s registere registere
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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 all attachment with an address.

SIGNATURE:

FILED

May 13 1997 8:00am