## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

Corporation	MENT # 6795	<i>,</i>	· - /					
	SIDE OF LAKE CITY, INC	<b>)</b> .	. ,		# 100/10 A(H) 40/4(D )A(R) 8/	HEN JOHN BIBN BIBN	B A 4 B B   <del>8</del> 4	<b>.</b> 111 81811 81811 1981
Principal Place of	of Business	Mailing Address						
RT 13 BOX		RT 13 BOX 1	.072					
LAKE CITY		LAKE CITY FI						
					3. Date Incorporated or Qualifi	ed 3a. Dat	e of Last R	•
2. Principal Plac	ce of Business	2a. Mailing Addre			07/24/1980 4. FEI Number		04/17/1	995 Applied For
1		26	00		59-2045499		<b>→</b>	Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #,	etc.		5. Certificate of Status Desired	, D		Additional
City & State		City & State			6. Election Campaign Financin			Required
3		28			Trust Fund Contribution	" 🗆		O May Be d to Fees
Zip Ti	Country	Zip	Cou	intry	8. This corporation has liability		ax under s	199.032,
4	9. Name and Address of Curr	29  rent Registered Agent	30		Florida Statutes   10. Name and Address of Ne	Yes No	Agent	
				81 Name		in regionorea	rigo	
BICKEL	., Brian D			82 Street Add	dress (P.O. Box Number is Not Acce	ptable)		
	BOX 1072			83				
LAKE C	CITY FL 32055			63				
				84 City		FL	85 Z	p Code
or registerer familiar with	o the provisions of Sections 607.05 of agent, or both, in the State of Fl n, and accept the obligations of, Si	lorida. Such change was a	iuthorized by the d	ve-named corpororporation's bos	oration submits this statement for the ard of directors, I hereby accept the	purpose of ch	anging its r s registered	registered offici Lagent, Lam
or registere: familiar with SiGNATURF	o agent, or both, in the State of Hin, and accept the obligations of, Si Signature, typod or printed name of registered a	lorida. Such change was a ection 607.0505, Florida S	iuthorized by the distatutes.	ve named corporation is bea	ard of directors. I hereby accept the	purpose of ch appointment as	s registered	Jagent. I am
or registerer familiar with SIGNATURE SI	to agent, or both, in the State of Fl n, and accept the obligations of, Si Signature, typod or printed name of repetitived at OFFICERS / PTS	forida. Such change was a ection 607.0505, Florida S gent and the if applicable.	With the Control of t	Corporation's boa	ard of directors. I hereby accept the activation of directors and the continuation of	purpose of ch appointment as DATE OFFICERS ANI	s registered	Jagent. I am
or registerer familiar with SIGNATURE SI	no agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of rejectively at OFFICERS /  PTS  BICKEL, BRIAN D	iorida. Such change was a ection 607.0505, Florida S yent and fide if applicable AND DIRECTORS	(NOTE: Registered  13.  IE 1.17	corporation's bos	ard of directors. I hereby accept the activation of directors and the continuation of	purpose of ch appointment as DATE OFFICERS ANI	o DIRECTO	PRS IN 12
or registerer familiar with SIGNATURE SI 2.  IILE IAME TREET ADDRESS	no agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	iorida. Such change was a ection 607.0505, Florida S yent and fide if applicable AND DIRECTORS	withorized by the distatutes.  POTE: Registered  13.  IE 1.17  1.2 N	Aport signar record  Aport signar record  IILE  MME  KEET ADDRESS	ard of directors. I hereby accept the activation of directors and the continuation of	purpose of ch appointment as DATE OFFICERS ANI	o DIRECTO	PRS IN 12
or registere familiar with SIGNATURE si	no agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of rejectively at OFFICERS /  PTS  BICKEL, BRIAN D	iorida. Such change was a ection 607.0505, Florida S yent and fide if applicable AND DIRECTORS	White Registered by the distances.    Note: Registered   1.17	Agent signar ne rees of the test of the te	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as pari OFFICERS ANI	o DIRECTO	PRS IN 12
or registerer familiar with SIGNATURE SI ILLE ILLE ILLE ILLE ILLE ILLE ILLE	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	iorida. Such change was a ection 607.0505, Florida S  Jon's and the if applicable.  AND DIRECTORS	Charter   Charter	Agent signer me resur- Agent signer me resur- ITLE MME REET ADDRESS TY - ST - ZIP ITLE MME	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as pari OFFICERS ANI	D DIRECTO	DES IN 12
or registerer familiar with SIGNATURE  SIGNATURE  SI  2.  THE  AME  THEET ADDRESS  ITY-S1-ZIP  THEET ADDRESS  TREET ADDRESS	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	iorida. Such change was a ection 607.0505, Florida S  Jon's and the if applicable.  AND DIRECTORS	13.   1.1   1.2   1.3   1.4   1.3   1.4	Agent signar ne resurs  Agent signar ne resurs  IILE  MME  HEET ADDRESS  TY-ST-ZIP  IILE  MME  MRET ADDRESS	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as pari OFFICERS ANI	D DIRECTO	PRS IN 12 Addition
or registerer familiar with SIGNATURE  SIGNATURE  SI  12.  IILE  IAME  TREET ADDRESS  ITY-ST-ZIP  TREET ADDRESS  ITY-ST-ZIP	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	iorida. Such change was a ection 607.0505, Florida S  Jon's and the if applicable.  AND DIRECTORS	CNOTE   Registrates     CNOTE   Registrates     13.     12.     1.1     1.2     1.3     1.4     1.5     1.5     2.1     2.2     2.3     2.4	Agent signer members TILE MME REET ADDRESS TY-ST-ZIP DILE MME REET ADDRESS TY-ST-ZIP	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as nati OFFICERS ANI	D DIRECTO	PRS IN 12 Addition
or registerer familiar with signature si	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	Iorida. Such change was a ection 607.0505, Florida S  unit and the if april carle.  AND DIRECTORS  DELET	CNOTE   Registrates     CNOTE   Registrates     13.     12.     1.1     1.2     1.3     1.4     1.5     1.5     2.1     2.2     2.3     2.4	Apint signature feet of the transfer of the tr	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as nati OFFICERS ANI	DIRECTC Change	DERS IN 12 Addition Addition
or registers familiar with SIGNATURE SIGNATURE SI SIGNATURE SI	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	Iorida. Such change was a ection 607.0505, Florida S  unit and the if april carle.  AND DIRECTORS  DELET	Charter   Char	Apint signature feet of the transfer of the tr	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as nati OFFICERS ANI	DIRECTC Change	PRS IN 12 Addition Addition
or registers familiar with SIGNATURE  SIGNATURE  SI  ILE  IAME  THEET ADDRESS  ITY-ST-ZIP  ITLE  ITLE  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	Iorida. Such change was a ection 607.0505, Florida S  Juntard Bis if april Carlo.  AND DIRECTORS  DELFT  DELFT	### Content of the Co	Apint signature feet of the transfer of the tr	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as PATE OFFICERS ANI	DIFFECTC Change Change	DES IN 12 Addition Addition
or registers familiar with signature signature. Signature signatur	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	Iorida. Such change was a ection 607.0505, Florida S  unit and the if april carle.  AND DIRECTORS  DELET	### Content of the Co	Apint signature feet in the state of the sta	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as PATE OFFICERS ANI	DIRECTC Change	DERS IN 12 Addition Addition
or registers familiar with SIGNATURE  SIGNATURE  SI  12.  ITLE  IAME  ITHEET ADDRESS  ITY-ST-ZIP  ITLE  ITLE  AME  ITHEET ADDRESS  ITY-ST-ZIP  ITLE  AME  ITHEET ADDRESS  ITY-ST-ZIP  ITLE  AME  ITHEET ADDRESS  ITY-ST-ZIP  ITLE  AME  AME  AME  AME  AME  AME	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	Iorida. Such change was a ection 607.0505, Florida S  Juntard Bis if april Carlo.  AND DIRECTORS  DELFT  DELFT	CNOTE Regressed   13.	Apint signature feet in the state of the sta	ard of directors. I hereby accept the activation of directors and the continuation of	e purpose of ch appointment as PATE OFFICERS ANI	DIFFECTC Change Change	DRIS IN 12 Addition Addition Addition
Or registers familiar with SIGNATURE  SIGNATURE  SI  12.  ITLE  IAME  ITHEET ADDRESS  ITY-ST-ZIP  ITLE  ITLE  AME  ITHEET ADDRESS  ITY-ST-ZIP  ITLE  ITHEET ADDRESS  ITY-ST-ZIP	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	DELF1   DELF1	CNOTE Regressed   13.	Apint signor in resur- Apint signor in resur- ITLE  MME  MEET ADDRESS  TY-ST-ZIP  ITLE  MME  MEET ADDRESS  TY-ST-ZIP  TLE  MME  MEET ADDRESS  TY-ST-ZIP  TLE  MME  MRE  MRE  MRE  MRE  MRE  MRE  M	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as DATE OFFICERS ANI	O DIRECTO Change Change Change	DES IN 12 Addition Addition Addition
OF FEGISLE OF FAMILIAN WITH SIGNATURE  SIGNATURE  SI  12.  11LE  IAME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  IT	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	Iorida. Such change was a ection 607.0505, Florida S  Juntard Bis if april Carlo.  AND DIRECTORS  DELFT  DELFT	CNOTE: Regressed   13.	April signor protector  April	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as DATE OFFICERS ANI	DIFFECTC Change Change	DES IN 12 Addition Addition
Or registeres familiar with SIGNATURE  SIGNATURE  IZ.  III.E  IAME	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	DELF1   DELF1	CNOTE: Regressed   13.	ABINI SILING THE TREATMENT OF THE TREATM	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as DATE OFFICERS ANI	O DIRECTO Change Change Change	DES IN 12 Addition Addition Addition
or registers familiar with signature	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	DELF1   DELF1	CNOTE: Fing secret   T3.     IE	April signor protector  April	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as DATE OFFICERS ANI	O DIRECTO Change Change Change	DES IN 12 Addition Addition Addition
Or registeres familiar with SIGNATURE  SIGNATURE  ILE.  ILLE  IAME  IAME	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	DELF1   DELF1	CNOTE: Regeneral   13.	ABINI SILIVA DE TERRITO  ABINI SILIVA DE TERRITO  ABINI SILIVA DE TERRITO  ILLE  MALE  REET ADDRESS  IY-SI-ZIP  ILLE  MALE  IRLET ADDRESS  IY-SI-ZIP  ILLE  MALE  REET ADDRESS  IY-SI-ZIP  REET ADDRESS  IY-SI-ZIP	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as pari OFFICERS ANI	O DIRECTO Change Change Change	DES IN 12 Addition Addition Addition
Or registeres familiar with SIGNATURE SIGNATURE SIGNATURE SITE SITE SITE SITE SITE SITE SITE SIT	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	DELET	Unionized by the distances.    13.	AGINE SEPART TO THE TO	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as pari OFFICERS ANI	Change  Change  Change	DES IN 12 Addition Addition Addition Addition
Or registeres familiar with SIGNATURE  SIGNATURE  ILE.  ILLE  IAME  IAME	po agent, or both, in the State of Fin, and accept the obligations of, Signature, typod or printed name of repetitives at PTS  PTS  BICKEL, BRIAN D  RT. 13 BOX 1072	DELET	Title	ADDRESS TY-ST-ZIP TILE MME REET ADDRESS	ard of directors. I hereby accept the activation of the control of	e purpose of ch appointment as pari OFFICERS ANI	Change  Change  Change	DES IN 12 Addition Addition Addition Addition

SIGNATURE:

3-18-96 904-752-0975

Dayting Proper