PROFIT CORPORATION ANNUAL REPORT 1996			FLOHIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					
DOCUM 1. Corporation N HY'S T			(3)					
Principal Place o	of Business	Mailing A	Address					
	ational speedway blvd. Each Fl 32114		E M I CSWY RITT ISLAND FL 329	52	Date incorporated or Qua	lified 9e Dat	e of Last Re	anord
					07/24/1980		05/01/19	95
2, Principal Plac	ce of Business	2a. Mailir	ng Address		4. FEI Number 59-2010907			Applied For Not Applicable
Suite, Apt. #,	elc.	Suite	, Apt. #, etc.		5. Certificate of Status Desir	ed 🔲	\$8.75	Additional
City & State		27 City i	& State		Election Campaign Finan Trust Fund Contribution	cing	\$5.00	Required May Be to Fees
Zip 24	Country 25	Zıp	3	Gountry 0	8. This corporation has liabil Florida Statutes	ity for intangible t Yes \ \ No	ax under s	199.032,
	9, Name and Address of Curre	nt Registered	Agent	81 Name	10. Name and Address of	New Registered	Agent	
MERRIT 11. Pursuant to or registerer familiar with	ST MERRITT ISLAND CAUSEW T ISLAND FL 32952 the provisions of Sections 607:050 d agent, or both, in the State of Flor , and accept the obligations of, Sec	2 and 607.150	8, Florida Statutes, ge was authorized i Florida Statutes.	84 City the above-named corpy the corporation's k	poration submits this statement for loard of directors. Ehereby accept the	FL he purpose of che appointment a	anoing its r	o Code egistered office agent. I am
	ignature, typed or printed name of registered ag-			Registered Agent signature rec		DATE		
TITLE NAME STREET ADDRESS	PD SHARP, BRUCE 700 EAST MERRITT ISLAN	D CAUSEWA	DELETE	13. 1.1 TITLE 1.2 NAVE 1.3 STREET ADDRESS	ADDITIONS/CHANGES T		ID DIRECTO	DRS IN 12
TITLE NAME STREET ADDRESS	MERRITT ISLAND FL STD SHARP, NANCY 700 MERRITT IS CSWY		DELETE	1.4 CITY - SI - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS			Change	☐ Addition
CITY-ST-ZIP TITLE	MERRITT ISLAND, FL 0 D		DELETE	2.4 CHTY-ST-ZHP 3.1 THTLE	The second secon		Change	Addition
NAME STREET ADDRESS	FELSOT, GREGG 700 EAST MERRITT ISLAN MERRITT ISLAND FL	d Causewa		3.2 NAME 3.3. STREET ADDRESS	~		Ghange	☐ Nation
CITY-ST-ZIP TITLE NAME STREET ADDRESS	MENNIII ISLAND FL		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS			☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DEFELE	4.4 CHY-ST-ZIP 5.1 TITLE \$ 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-ST-ZIP	800001 -06/07/96- ***200.00	8555 -01033(1366 102	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		cl	Change	Addition
14. I do hereby certify that oath; that I	the information indicated on this and	nual report or s poration or the r	upplementa! annual receiver or trustee e	ed and does not qual report is true and accompowered to execute	ify for the exemption stated in Section curate and that my signature shall have this report as required by Chapter (ve the same loos	al effect as if	f made under