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PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # 688783

FILED May 19 1997 8:00am Secretary of State

Principal Place of Business 111 RIVERSIDE AVENUE P O BOX 44100 JACKSONVILLE FL 32231-4100 2. Principal Place of Business 2. Suite, Apt. #, etc. Suite, Apt. #, etc.								
\$ACK BONVILLE	E FL 82231-4100	JACKSONVILLE FL 32231	-4100		3. Date Incorporated or Qualified	За.	Date of Last R	eport
					09/09/1980	(05/01/1996	
	lace of Business	2a. Mailing Address			4. FEI Number		Ar	plied For
Sulte, Apt.	# oto	Suite, Apt. #, etc.			59-2036000			t Applicable
22 Suite, Apr. 1	π, αι σ.	27 Soile, Apr. #, etc.			5. Certificate of Status Desired	Χī	\$8.75 / Fee Re	Additional equired
City & State	9	City & State			6. Election Campaign Financing		\$5.00	···
23		28			Trust Fund Contribution		Added	
Zip	Country	Zip	—	untry	8. This corporation has liability for			. 199.032,
24	9. Name and Address of Current	29	30		Florida Statutes X 10. Name and Address of New Re		□ No	
	to the provisions of Sections 607.050? egistered agent, or both, in the State m familiar with, and accept the obliga	end 607.1508, Florida Statut of Florida. Such change was a tions of, Section 607.0505, Flo	es, the a authorize orida Sta	84 City above-named by the corpututes.	corporation submits this statement for the poration's board of directors. I hereby acce	F purpose pt the a	*L '	Code is registered registered
SIGNATURE	Signature, typed or printed name of registered ager							
					required when reinstaling)	DATE		RS IN 12
12.	OFFICERS AND		13.		required when reinstating) ADDITIONS/CHANGES TO OFFICE			
12.		DIRECTORS	13.				ND DIRECTOR	
12.	V PAYLOR, LARRY E 111 RIVERSIDE AVE	DIRECTORS	13. 1.17 1.2	nle			ND DIRECTOR	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PAYLOR, LARRY E 111 RIVERSIDE AVE JACKSONVILLE, FL 00000	DELETE	13. 1.11 1.2 h 1.3 S 1.4 O	HILE NAME STREET ADORESS CITY-ST-ZIP			ND DIRECTOR Change	Addilio
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	V PAYLOR, LARRY E 111 RIVERSIDE AVE JACKSONVILLE, FL 00000 PD	DIRECTORS	13. 1.11 1.24 1.35 1.40 2.11	NAME STREET ADDRESS CITY-ST-ZIP			ND DIRECTOR	Addilios
12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	V PAYLOR, LARRY E 111 RIVERSIDE AVE JACKSONVILLE, FL 00000 PO HASKELL, PRESTON H	DELETE	13. 1.17 1.27 1.35 1.40 2.17 2.21	NAME STREET AODRESS CITY-ST-ZIP UITLE			ND DIRECTOR Change	Addilio
12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS	V PAYLOR, LARRY E 111 RIVERSIDE AVE JACKSONVILLE, FL 00000 PO HASKELL, PRESTON H 111 RIVERSIDE AVE	DELETE	13. 1.11 1.24 1.35 1.40 2.11 2.21 2.35	NAME STREET ADDRESS DITY-ST-ZIP UILLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFI		ND DIRECTOR Change	Addilios
12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	V PAYLOR, LARRY E 111 RIVERSIDE AVE JACKSONVILLE, FL 00000 PO HASKELL, PRESTON H	DELETE	13. 1.11 1.24 1.35 1.40 2.11 2.21 2.35	NAME STREET AOORESS CITY-ST-ZIP IIILE NAME STREET AOORESS CITY-ST-ZIP			ND DIRECTOR Change	Addition
12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	V PAYLOR, LARRY E 111 RIVERSIDE AVE JACKSONVILLE, FL 00000 PO HASKELL, PRESTON H 111 RIVERSIDE AVE JACKSONVILLE, FL 00000 S VANDERGRIFF, C. EDWARD	DELETE	13. 1.17 1.24 1.35 1.46 2.17 2.2 2.3 2.4 3.17	NAME STREET AOORESS CITY-ST-ZIP IIILE NAME STREET AOORESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change	Addition
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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 of the receiver or trustive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.