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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 601031

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Apr 14 1997 8:00an	n
Secretary of State	

Principal Plac 504 JEFFERSC PO BOX 1538		Mailing Address 504 E JEFFERSON STR PO BOX 1538 BROOKSVILLE FL 34805-1 US	1538	3. Date Incorporated or Qualified 06/19/1981	3a. Date of Last 04/15/1996	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number		pplied For
וֹ וֹ וֹ		26		59-2109540	}	lot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 7	Additional
City & Sta	to	City & State				lequired
City & 3:4 3	IC .	28		Election Campaign Financing Trust Fund Contribution		May Be to Fees
Z(p	Country	Zip	Country	8. This corporation has liability for		
4	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Curre	nt Registered Agent	Add at	10. Name and Address of New Re	gistered Agent	
	RNER, JOHN, S		81 Name			
	198 WESTMINSTER CT		82 Street Add	dress (P.O. Box Number is Not Acceptal	ole)	
BRU	OOKSVILLE FL 34601		63			
			84 City		FL 85 Zip	Code
office or agent 1:	registered agent, or both, in the State am familiar with, and accept the obliq	e of Florida. Such change was gations of, Section 607.0505, F	authorized by the corpora lorida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	pt the appointment a	s registered
IGNATURE	Signature, typed or powerd name of mg scened at OFFICERS AN	gent and tice if applicable (NO ND DIRECTORS	authorized by the corporal lorida Statutes. 1E: Registered Agent signature requ 13.	ation's board of directors. I hereby acce	pt the appointment a	s registered RS IN 12
IGNATURE 2. Ilf	Signature, hybothor prime if number of ring secret at OFF (CERS A)	gent and title if applicable (NO	authorized by the corporal lorida Statutes. 1E: Registered Agent signature required. 13. 1.1 TITLE	ation's board of directors. I hereby acce	pt the appointment a	s registered
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I do nerety certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Former 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, of or in attachment with an address.

SIGNATURE:

3-4-57 352-796-3518