

FILED

Jun 12 1997 8:00am
Secretary of State

[illegible]

3. Date Incorporated or Qualified 01/15/1973		3a. Date of Last Report 03/29/1996	
4. FEI Number 59-2368306			Applied For
			Not Applicable
6. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			

2. Principal Place of Business		2a. Mailing Address
21	Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22	City & State	27 City & State
23	Zip	28 Zip
24	Country	29

10. Name and Address of New Registered Agent

BOUDREAN, MARIE D
4813 LAKE CHARLES DRIVE
KENNETH CITY FL 33709

81	Name	WHITMAN, MURIEL	
82	Street Address (P.O. Box Number Is Not Acceptable)	5711 53 RD AVE N	
83			
84	City	KENNETH CITY FL	85 Zip Code 33709

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Gregory Schulman* _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12.		OFFICERS AND DIRECTORS
TITLE	P	☒ DELETE
NAME	BOUDREAU, MARIE D	
STREET ADDRESS	4813 LAKE CHARLES DRIVE	
CITY - ST - ZIP	KENNETH CITY FL 33709	
TITLE	D	☒ DELETE
NAME	SMITH, WILLIAM	
STREET ADDRESS	5272 59TH STREET NORTH	
CITY - ST - ZIP	KENNETH CITY FL 33709	
TITLE	VP	☒ DELETE
NAME	DUTTON, JUDY	
STREET ADDRESS	5680 47TH AVENUE NORTH	
CITY - ST - ZIP	KENNETH CITY FL 33709	
TITLE	D	☒ DELETE
NAME	ESHLEMAN, LESTER	
STREET ADDRESS	6048 52ND AVENUE NORTH	
CITY - ST - ZIP	KENNETH CITY FL 33709	
TITLE	D	☒ DELETE
NAME	FLETCHER, KATHERINE M	
STREET ADDRESS	5561 49TH AVENUE NORTH	
CITY - ST - ZIP	KENNETH CITY FL 33709	
TITLE	D	☒ DELETE
NAME	PATE, ALBERT F	
STREET ADDRESS	5698 44TH AVENUE NORTH	
CITY - ST - ZIP	KENNETH CITY FL 33709	

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	WHITMAN, MURIEL	
1.3 STREET ADDRESS	5711 53 AVEN	
1.4 CITY-ST-ZIP	KENNETH CITY FL 33709	
2.1 TITLE	S	☐ Change ☐ Addition
2.2 NAME	JUDY DUTTON	
2.3 STREET ADDRESS	5680 47 AVEN	
2.4 CITY-ST-ZIP	KENNETH CITY FL 33709	
3.1 TITLE	D	☐ Change ☐ Addition
3.2 NAME	CRAWBURN, JOHN	
3.3 STREET ADDRESS	4700 58 ST N	
3.4 CITY-ST-ZIP	KENNETH CITY, FL 33709	
4.1 TITLE	D	☐ Change ☐ Addition
4.2 NAME	PETROWSKI, ED	
4.3 STREET ADDRESS	5693 45 AVEN	
4.4 CITY-ST-ZIP	KENNETH CITY FL 33709	
5.1 TITLE	VP	☐ Change ☐ Addition
5.2 NAME	WRIGHT, MARY E.	
5.3 STREET ADDRESS	5720 47 AVEN	
5.4 CITY-ST-ZIP	KENNETH CITY FL 33709	
6.1 TITLE	D	☐ Change ☐ Addition
6.2 NAME	WITZMAN, JOHN	
6.3 STREET ADDRESS	6142 47 AVEN	
6.4 CITY-ST-ZIP	KENNETH CITY FL 33709	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)