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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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220 CD BONNON RD 120 CD RD 1)
120 OLD BOWNTON RD. BOWNTON BOX FI. 33463-949 2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified O//03/1973 OA/16/1996 2. Principal Place of Business 3. Date Incorporated or Qualified O//03/1973 OA/16/1996 2. Principal Place of Business 3. Date Incorporated or Qualified O//03/1973 OA/16/1996 3. Date Incorporated or Qualified O//03/1996 3. Date Incorporated or Qualified O//03/1996 3. Date Incorporation O//03/1996 3. Date Incorporated or Qualified O//03/1996 3. Date Incorporate	Principal Plac	e of Business	Mailing Address		
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2. Principal Place of Business 2. 2. April 4, etc. 2. Suite, April 5, etc. 2. Suite, April 4, etc. 2. Suite, April 5, etc. 2. Suite, April 5, etc. 2. Suite, April 5, etc. 2. Suite, April 6, etc. 2.					
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Suite, Apr. #, etc. Suite, Apr. #, etc. Suite, Apr. #, etc. 27 Suite, Apr. #, etc. 27 Suite, Apr. #, etc. 27 28 28 29 30 True Fund Combibution \$8.75 Additional Fee Required \$8.75 Additional Fee Required \$8.70 May Pe Added to Fees 70	<u></u>		ļ,		EO 0400E74
Cay & State 27 Cay & State 28 State Cay & State					— \$9.75 Additional
20 Country Zip	h				Fee Required
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**HART, JAMES S H11-SUNPLOWER CIR	24			30	Florida Statutes Yes No
# HART, JAMES S H19UNFLOWER CIR ROYAL PALM BEAGH FL 33411 Boyn fon Beach, FL 33424 11. Pursuant to two provisions of Socians 617 0002 and 617 1508. Florida Statutes, the above-named corporation attentits this statement for the purpose of changing its registered agent. I am anylar with, age agent the bigglacines of, Socian 617 5003, Florida Statutes, the above-named corporation attentits this statement for the purpose of changing its registered agent. I am anylar with, age agent the bigglacines of, Socian 617 5003, Florida Statutes, the above-named corporation attentits this statement for the purpose of changing its registered agent. I am anylar with, age agent the bigglacines of, Socian 617 5003, Florida Statutes, the above-named corporation attentits this statement for the purpose of changing its registered agent. I am anylar with, age agent the bigglacines of, Socian 617 5003, Florida Statutes, the above-named corporation attentits this statement for the purpose of changing its registered agent. I am anylar with, agent agent are agent agent and the statement of registered agent agent and the statement of registered agent. I am anylar with, agent ag		9. Name and Address of Currer	it Registered Agent	<u> </u>	Name
H1-SUNFLOWER CIR	Januari I	IAMES S			Scott MONIGOMERY
## City Bound Beach FL 33411 11. Pursuant to toe provisions of Socions of Socions of Stocians of Stoc		NAMES S NEI-AMPRICIR' /00	5 SURAHI ANA	, 82 S	Street Address (P.O. Box Number is Not Acceptable)
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 agent. I am famply with, group dayport the pulpipations of Section 617.0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am famply with, group dayport the pulpipations of Section 617.0502 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am famply with, group dayport the pulpipations of Section 617.0502 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am famply with, group dayport the pulpipations of Section 617.0502 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am famply with, group dayport the pulpipations of Section 617.0502 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am famply with, group dayport the pulpipations of Section 617.0502 florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am famply with, group dayport the pulpipations of Section 617.0502 florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. In the submit a submit submits this statement for the purpose of changing the group of the purpose of changing its registered agent. In the submit and purpose of changing the purpose of changing the group of purpose of the purpose of changing its registered agent. In the submit a submit and purpose of changing the submit and purpose				83	
11. Pursuant to inc provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am family with, and aggapt the publications of Section 617.0503, Florida Statutes. 13.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		84 0	City A A BS Zin Code
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12 OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	agent. I a	am familiar with, and accept the oblig	ations of, Section 617.0503, Flo	rida Statutes.	1/15/02
TITLE D	SIGNATURE .	Signature typed or printed name of register in age	and title if applicable. (NOTE	: Registered Agent si	signature required when reinstaling) DATE
NAME FIELER, EDITH 12 NAME 1210 OLD BOYNTON RD., \$108 13 STREET ADDRESS 1230 Old Boynton Road, Apt. \$213					
STREET ADDRESS 1210 OLD BOYNTON RD., #108 1.3 STREET ADDRESS 1.4 OTY-ST-ZIP BOYNTON BEACH FL 33426 Addition		į -	X X DELETE		(
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02NAME -04/21/9701133046			DELETE		Change
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6.4 CITY-ST-ZIP CITY-ST-ZIP 14.2 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 hormation 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.

FILED

Apr 18 1997 8:00am

Secretary of State