## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DiVISION OF CORPORATIONS

DOCUMENT #

729113

(1)

## FILED Apr 24 1997 8:00am Secretary of State

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100 EAST KENTUCKY AVENUE 100 EAST KENTUCKY AVENUE DELAND FLORIDA 32724 DELAND FLORIDA 32724-2375									
								3. Date Incorporated or Qualified 3a. Date of La 04/29/	
2.	Principal Place of Busi	ness	2a.	Mailing Address				4. FEI Number	Applied For
21			26					59-1724494	Not Applicable
Suite, Apt. #, etc.  22 City & State  City & State  28						5 Additional Required			
						00 May Be led to Fees			
24	Zip	Country 25	29	Zip	30 Cd	ountry		8. This corporation has liability for intangible tex under Florida Statutes Yes No	er s. 199.032,
	9. Name	and Address of Curr	ent Regis	tered Agent				<ol> <li>Name and Address of New Registered Agent</li> </ol>	
	PENNEDY MOUA	ři D				81	Name		
KENNEDY, MICHAEL R. 687 BEVILLE ROAD, SUITE A SOUTH DAYTONA FL 32119			82	12 Street Address (P.O. Box Number is Not Acceptable)					
			83						
				84	City	FI 85 7	Zip Code		

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.

agent. i a	im tamiliar with, and accept the obligations of	, Section 617,0503, Fig	rida Statutes.	
SIGNATURE	Signature, typed or printed name of registered agent and title	Y applicable (NOTE	Registered Agent signature	a required when reinstaine) DATE
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	PD Change MAddition
NAME	COLLIER, JOE		1.2 NAME	VIGGO LAUMARK
STREET ADDRESS	100 E. KENTUCKY AVE. H-3		1.3 STREET ADDRESS	VIGGO LAUMARK 1624 MERCERS FERNERY RD
CITY-ST-ZIP	DELAND FL		1.4 CITY - ST - ZIP	DELAND FL 32720
TITLE	VD	DELETE	2.1 TITLE	Change Addition
NAME	ROSS, ROBERT	•	2.2 NAME	KAREN S. FOGLEMAN
STREET ADORESS	3815 N US STE 54		2.3 STREET ADDRESS	KAREN S. FOGLEMAN 100 E. KENTUCKY AVE B6
CITY-ST-ZIP	COCO FL		2. 4 CITY-ST-ZIP	DELAND FL 32724
TITLE	SD	DELETE	3.1 TITLE	Change M Addition
NAME	MIDDLETON, BARBARA		3.2 NAME	H. VANN RHODES
STREET ADDRESS	100 E. KENNEDY AVE. F-1		3.3 STREET ADDRESS	100 E. KENTUCKY AVE K4
CITY-ST-ZIP	DELAND FL	_	3.4. CITY-ST-ZIP	DELAND FL 32724
TITLE	TD	DELETE	4.1 TITLE	Change Addition
NAME	QUICK, WALTER	,	4. 2 NAME	H. VANN RHODES 100 E. KENTUCKY AVE K4
STREET ADDRESS	100 E. KENTUCKY AVE. A-1		4.3 STREET ADDRESS	100 E. KENTUCKY ME INT
C(1Y - S1 - ZIP	DELAND FL		4.4 CITY-ST-ZIP	DELAND FL 32724
TITLE	D	DELETE	5.1 TITLE	Change Addition
NAME	MIDDLETON BARBARA	•	5.2 NAME	SUETTA CHERNYSH 911 MESQUITE TR
STREET ADORESS	100 E KENTURCKY AVE F1		5.3 STREET ADDRESS	
COY-ST-ZIP	DELAND F		5.4 CITY-ST-ZIP	DELAND FL 32724
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
C(17 - 51 - 7)P			E & CITY . CT. 7ID	

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)