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NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 742131

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4645 WHITE CEDAR LANE DELRAY BCH FL 33445 US 3. Date Incorporated or Qualified 03/20/1978 3a. Date of Last Report 02/13/1995 2. Principal Place of Business 2. Mailing Address 2. Milling Address 3. Date Incorporated or Qualified 03/20/1978 4. FEI Number 59-1856831 Not Applicable Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 3. Suite, Apt. #,
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24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 81 Name Machine Note: Registered Agent 82 Street Address (P.O. Box Number is Not Acceptable) 10. Name and Address of New Registered Agent 82 Street Address (P.O. Box Number is Not Acceptable) 13 Street Address (P.O. Box Number is Not Acceptable) 14 Orly
BEVHEIM, DANIEL S JR 4198 LIVE OAK BLVD DELRAY BEACH FL 33445 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, or both, in the State of Forida. 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 obtequations of Sections 617.0503. Florida Statutes. Signature. Signature. Signature, typed or privated name of registered agent and title if applicable NOTE: Registered Agent signature required when renstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE DELETE 1.1 T
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BEVHEIM, DANIEL S JR 4198 LIVE OAK BLVD DELRAY BEACH FL 33445 82 Street Address (P.O. Box Number is Not Acceptable) 83 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 Jorda. 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 obtigations of Section 617.0503, Florida Statutes. SIGNATURE Signature, byted or pinted name of registered agent and title if applicable (NOTE: Registered Agent signature required when renstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE PD Addition SIRRET ADDRESS 4198 LIVE OAK BLVD 1.3 STREET ADDRESS 1.4 STREET ADDRESS 1.5 STREET ADDRESS 1.5 STREET ADDRESS 1.6 STREET ADDRESS 1.7 DATE 1.7 DATE 1.8 DATE 1.8 DATE 1.9 DATE 1.9 DATE 1.9 DATE 1.1 TITLE 1.1 TITLE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS
4198 LIVE OAK BLVD DELRAY BEACH FL 33445 84 City FL 85 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when renatating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE NAME SIRRET ADDRESS 1.3 STREET ADDRESS
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6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this angular report or reunplemental enough report is the angular report in the state of the sta

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 of an attachment with an address.

SIGNATURE: 1

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Secretary of State

Feb 01 1996 8:00 am