It 26 51-0228955 No Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Re R2 27 Country 5. Certificate of Status Desired Fee Re R3 28 City & State 6. Electon Campaign Financing \$5.00 R4 28 Country Zip Country 8. This corporation has lability for intangible tax under s. 15 R4 28 29 30 This corporation has lability for intangible tax under s. 15 R4 28 29 Country 8. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 81 Name 83 8150 SOUTH FEDERAL HWY 83 84 City FL 85 Zp 94 City FL 85 Zp Country 83 2p 2p Country 83 2p	FILE NOW: FILING NONPROFIT CORPORATION ANNUAL REPORT 1996				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS						
Principal Place of Business Mailing Address BisD S. FEDERAL HWY. HYPOLUXO FL 33462	JMEN1	# 749	982	(5)							
Principal Place of Business Making Address BISD S. FEDERAL HWY. HTPOLUXO FL 33462 BISD S. FEDERAL HWY. HTPOLUXO FL 33462 BISD S. FEDERAL HWY. HTPOLUXO FL 33462 2. Principal Place of Business 2a. Making Address 4. FEI Number 3. Date Incorporated or Countinn! 3a. Date of Last Re 02/21/195 2. Principal Place of Business 2a. Making Address 4. FEI Number 51-0228955 1 Suite. Apt. #, etc. 2 Suite. Apt. #, etc. 2 City & State 3 Date Incorporated or Countinn! 4. FEI Number Status Desired 2 City & State 3 Date Indocretation 2 Country 2 Country 2 Country 3 Name 4 25 2 Country 3 Date Indocretation 4 25 2 Country 4 25 3 Name 4 26 2 Country 4 28 3 Name 4 28 5 Name 4 28 5 Name and Address of Nov Registered Agent	Shore C	OLONY ASSO	CIATION, INC	Э.				1 10011 10011 03610 10101 1010		0101101011\$1011	NARIA NARRA (NAN
BISO S. FEDERAL HWY. HYPOLUXO FL 33462 BISO S. FEDERAL HWY. HYPOLUXO FL 33462 3. Date Incorporated or Qualified 11/29/1979 3a. Date of Last Re 0/2/21/198 2. Principal Place of Business 2a. Making Address 4. FEI Number And 0/2/21/198 2. Principal Place of Business 2a. Making Address 4. FEI Number And 0/2/21/198 Suite, Apt. #, etc. 2a Suite, Apt. #, etc. 5. Certificate of Status Desired \$8,75 /r Fee And 2. Only 5 State 2a Country Zp Country 5. Certificate of Status Desired Affect And Fee And 3. Name and Address of Current Registered Agent 6. Election Campaign Financing Yes Name 4. Do	ce of Busines	s	Mailir	ng Address							
3. Date Incorporated or Qualified 3a. Date of Last Re 1/1/29/1979 Q2/21/195 2. Principal Place of Business 2a. Maling Address 3. Stite, Apt. #, etc. 25 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State City & State 20 Country 28 Zp 29 Country 29 Country 20 Country 21 20 20 Country 21 20 20 Country 21 20 22 Country 30 Face Re 31 Name and Address of Current Registered Agent 31 Name 32 State 33 City & State 34 City in the DEFAU Hwy 415 South FEDERAL Hwy HYPOLUXO FL 33462 83 84 City in the State Float Statutes 90 Face Re 91 Name 82 State 92 20 93 State 94 City in the State Float State 94 City in the State Float State	8150 S. FEDERAL HWY. 8150 S. FEDERAL HWY.										
Principal Place of Business	HYPOLUXO FL 33462 HYPOLUXO FL 33462						_		ed 3a.		
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$6.75 / Fee Reg City & State City & State 6. Election Campagn Financing \$5.00 Zip Country Zip Country 8. This corporation has liability for intengebia tax unders is 10 State, Apt. #, etc. 28 30 Finicida Statutes Yes State 29 30 Finicida Statutes Yes No AMBACH, MICHAEL 8. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Yes No AMBACH, MICHAEL 8150 SOUTH FEDERAL HWY 82 Street: Address (P.O. Box Number is Not Acceptable) 83 HYPOLUXO FL 33462 83 84 City FL 65 Zo C 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as 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 or both, in cobins of Section 617.0503. Florida Statutes. Othereby accept the appointment as registered agent or both, florida statutes. State: Ad	Place of Busi	ness		lailing Address				4. FEI Number	i		Applied For
21 27 City & State City & State 6. Election Campaign Financing \$5,00 20 28 Country Zp Country B. This corporation has tability for intergible tax unders s. 15 20 28 30 Florida Statutes None State 3 29 30 Florida Statutes None State 4 25 29 30 Florida Statutes None 4 25 29 30 Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 4 8150 SOUTH FEDERAL HWY 81 82 Stree: Address (P.C. Box Number is Not Acceptable) 83 84 City FL 85 2p 9 Purplicate 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 bob, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or bobgations of, Section 617.0603. Florida Statutes. SIGNATURE 30/submit add or prelide agent aget and the Florida Statutes. MOIts Regetered Agent aget aget aget aget aget aget aget age	it. #, etc.		S	uite, Apt. #, etc.					······	\$8.75	Not Applicabl Additional
Instrume Point Country Zip Country Zip 2p 2p Country 2p Country 8. This copration has liability for intrangoble tax under s. 15 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent AMBACH, MICHAEL 810 Store: Address (P.O. Box Number is Not Acceptable) 83 810 SoUTH FEDERAL HWY 83 HYPOLUXO FL 33462 83 84 City FL 85 Store: Address (P.O. Box Number is Not Acceptable) 8150 SOUTH FEDERAL HWY 83 HYPOLUXO FL 33462 84 84 City 85 Store: Address (P.O. Box Number is Not Acceptable) 81 Store: Address (P.O. Box Number is Not Acceptable) 83 Store: Address (P.O. Box Number is Not Acceptable) 84 City 85 Store: Address (P.O. Box Number is Not Acceptable) 84 City 85 Score of Sectore 617.0502 and 617.1508. Florida Statutes. Store: Address (P.O. Box Number is Not Acceptable) 86 Store: Address (P.O. Box Number is Not Acceptable) 87 Bayratics Address 86 Score of Sectore 617.0502 and 617.1508. Florida Statutes.	ate		c	iity & State						\$5.0	0 May Be
S. Name and Address of Current Registered Agent S. Name and Address S. Sector 617.0503. Florida Statutes. S. Name and Address of Current Registered Agent Statutes. S. Name and Address of Current Registered Agent Statutes. S. Name and Address of Current Registered Agent Statutes. S. Name and Address of Current Registered Agent Statutes S. Name Addd		Country	Z	q		itry		8. This corporation has liability	for intangible	a tax under s.	d to Fees 199.032,
AMBACH, MICHAEL 8150 SOUTH FEDERAL HWY HYPOLUXO FL 33462	9. Nan			red Agent	30		i				
8150 SOUTH FEDERAL HWY HYPOLUXO FL 33462 83 84 City FL 85 Zp C 84 City FL 85 Zp C 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, by the corporation's board of directors. I hereby accept the appointment as registered age familiar with addition of the corporation's board of directors. I hereby accept the appointment as registered age familiar with a				<u> </u>		81 Name					
HYPOLUXO FL 33462 Bit Bit Bit City FL Bit Zip C Bit City FL Bit Zip C In presulant to the provisions of Soctions 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent accept the obligations of, Section 617.0503, Florida Statutes. IGNATURE						82 Street	Address	(P.O. Box Number is Not Acce	ptable)		
B4 City FL 85 Zip C 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its region 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, 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, 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 and thur applicable. Date IGNATURE											
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered age florida. Suchappoint florida Statutes. <tr< th=""><th>LUXU FL 3</th><th>9462</th><th></th><th></th><th>ŀ</th><th></th><th></th><th></th><th></th><th></th><th>Codo</th></tr<>	LUXU FL 3	9462			ŀ						Codo
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and accept the obligations of, Section 617.0503, Florida Statutes. IGNATURE Genetice, typed or prefed name of registered agent and the r'apprado. INTE: Registered Agent signature required when rendsting: DA*E OFFICERS AND DIRECTORS 13. ADD:TIONS/CHANGES TO OFFICERS AND DIRECTORS THE PD OFFICERS AND DIRECTORS TILE AMBACH, MICHAEL 13 STREET ADDRESS Statutes, typed or prefed mane of registered agent and the r'appression OFFICERS AND DIRECTORS THE PD OFFICERS AND DIRECTORS TILE AMBACH, MICHAEL 13 STREET ADDRESS STEET ADDRESS STEET ADDRESS STEET ADDRESS STEET ADDRESS STEET ADDRESS STEE						,			-		
AME AMBACH, MICHAEL 12 NAME TREET ADDRESS 8150 S. FEDERAL HWY. 13 STREET ADDRESS ITY-ST-ZIP HYPOLUXO FL 14 CITY-ST-ZIP Change	-	d or printed name of registe	red agent and title if appl	licabe. (NOTE: Registered	Agent signalure	required whe				RS IN 12
ITREET ADDRESS 8150 S. FEDERAL HWY. 1.3 STREET ADDRESS ITY-ST-ZIP HYPOLUXO FL 1.4 CITY-ST-ZIP ITLE VSD DELETE 21 TITLE AME AMBACH, JACK 22 NAME S150 S. FEDERAL HWY. 2.3 STREET ADDRESS 1.4 CITY-ST-ZIP ITY-ST-ZIP HYPOLUXO FL 2.3 STREET ADDRESS ITY-ST-ZIP HYPOLUXO FL 2.4 CITY-ST-ZIP ITTLE D DELETE 3.1 TITLE MARE MOORE, GENE 3.2 NAME ITREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS ITREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS ITTREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS ITREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS ITY-ST-ZIP HYPOLUXO FL 3.4 CITY-ST-ZIP	PD			DELETE	1111	LE				Change	Addition
ITLE VSD DELETE 21 TITLE Change AME AMBACH, JACK 22 NAME 23 STREET ADDRESS TREET ADDRESS 8150 S. FEDERAL HWY. 23 STREET ADDRESS ITY-ST-ZIP HYPOLUXO FL 2.4 C(I)Y-ST-ZIP ITLE D DELETE 3.1 TITLE MOORE, GENE 32 NAME 3.3 STPEET ADDRESS TREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS TREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS TREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS TY-ST-ZIP HYPOLUXO FL 3.4 C(I)Y-ST-ZIP			<i>.</i>								
AME AMBACH, JACK 22 NAME IREET ADDRESS 8150 S. FEDERAL HWY. 23 STREET ADDRESS IY-ST-ZIP HYPOLUXO FL 2.4 CIIY-SI-ZIP ILE D DELETE 3.1 TITLE MME MOORE, GENE 32 NAME IREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STREET ADDRESS ITY-ST-ZIP HYPOLUXO FL 3.4 CITY-ST-ZIP		LUXO FL								Chapter	
HYPOLUXO FL 2.4 CIIY-ST-ZIP TLE D DELETE 3.1 TITLE Change AME MOORE, GENE 3.2 NAME 3.2 NAME ITREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS ITY-ST-ZIP HYPOLUXO FL 3.4 CITY-ST-ZIP		CH, JACK								L Grange	Addition
D DELETE 3.1 TITLE Change AME MOORE, GENE 3.2 NAME TREET ADDRESS 8150 S. FEDERAL HWY. 3.3 STPEET ADDRESS (TY-ST-ZIP HYPOLUXO FL 3.4 CiTY-ST-ZIP			Ι.								
AME MOORE, GENE 32 NAME TREET ADDRESS 8150 S. FEDERAL HWY. 33 STPEET ADDRESS TTY-ST-ZIP HYPOLUXO FL 34. CITY-ST-ZIP		LUXO FL			-					CTI Change	Addition
TREET ADDRESS 8150 S. FEDERAL HWY. 333 STREET ADDRESS TTY-ST-ZIP 34. CITY-ST-ZIP 34. CITY-ST-ZIP	-	E GENE									
TY-ST-ZIP HYPOLUXO FL 34. CITY-ST-ZIP			(.		3.3 ST	PEET ADDRESS					
	HYPO	LUXO FL								<u> </u>	C Addition
	ł									L Change	Addition
AME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS	30										
4.5 STREET AUDRESS YTY-ST-ZIP 4.4 CITY-ST-ZIP 4.4 CITY-ST-ZIP	2										
ITLE DELETE 51 TITLE Change				DELETE			1			🔲 Change	Addition
IAME 52 NAME	ł				5 2 N/	ME	1				
5.3 STREET ADORESS 5.3 STREET ADORESS	is										
DTY-ST-ZIP										Chapze	Addition
ITLE DELETE 6.1 TITLE LUChange										പ്പെറ്റെയ്യും	
STREET ADDRESS 6.3 STREET ADDRESS	35										
6.4 CITY-ST-ZIP	1				6.4 CI	TY-ST-ZIP					
4. I 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 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 m 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	that the inform	ation indicated on th	hie ohn∩al ren∧rt r	sr eunniomontal a	nnual renort i	s true and a	accurate a	and that my signature shall have	e the same le	oal effect as i	t made under