## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 09, 2007 8:00 am Secretary of State

Principal Place of Business	1. Entity Nam	MENT #750504 DINGS OF MARTIN COUN		04-09-2007 90 05 227 3	068 050 ****	61.25		
Suite, Apt. #. etc.  Suite, Ap	4171-4196 S. E. LUCIE BLVD. PRIME MANAGEMENT Stuart, Fl. 34997 400 Toney Pava Dr				40		IBAK BUBA BUBA BUBAN BUBA	
Satile Apt. 4, etc.    Satile Apt. 4, etc.     Satile	2. Principal Place of Business - No P.O. Box #		3 Mailing Address PRIME MANAGEMENT					
Specification   Specificatio	·		Suite, Apt. #, etc. 2074 W. INDIANTOWN XXXXX		384	g-NP CR		
S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and soccept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and socce			TUPITER F-		4. FEI Number 59-226494	6	No	t Applicable
CORNETT, JANE 401 EAST OSCEOLA STREET STUART, FL 34994    Chy   FL   Zip Code	Zip	·	33 458	Country			Fee Required	
Street Address (P.O. Box Number is Not Acceptable)  City		5. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registi	ered Agent	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signave. Typed or protect harms of registered agent and tide if applicable.   INOTE. Registered Agent signalure required when remaising)   DATE	401 EAST OSCEOLA STREET							
8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature, typed or protect name of ingustered agent and tide if applicable.   INOTE Registered Agent separature required when remaissing)   DATE				City			FL Zip Code	9
NOTE Registered Agent ingretized agent and tole if applicable.   NOTE Registered Agent ingretized required when renetating)   DATE			or the purpose of changing its reg	istered office or reg	istered agent, or both, in	the State of Florida.	I am familiar with,	and accept
Trust Fund Contribution. Added to Fees   Florida Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 C    TITLE   RD   CHANGAR, GEORGE   CHANGA   C								
TITLE NAME CHASMAR, GEORGE SIREET ADDRESS CITY-ST-ZIP PT SALERNO, FL 34992  TITLE NAME RICCI, DOUG RICCI, DOUG STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE VP NAME SIREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SID STUART, FL 34997  TITLE SIREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE STUART, FL 34997	SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (NOTE, Reg	gistered Agent signature rec	quired when reinstating)	ι	DATE	
CITY-ST-ZIP PT SALERNO, FL 34992  CITY-ST-ZIP Delete TITLE RICCI, DOUG STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE VP HAAGENSON, ROBERT STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE PD STUART, FL 34997  TITLE PD Delete TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE PD Delete TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEEVLIN AARON STREET ADDRESS STREET ADDRESS STREET ADDRESS A4487 SE ST LUCIE BLVD STREET ADDRESS A4487 SE ST LUCIE'S BLVD CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEEVLIN AARON STREET ADDRESS STREET ADDRESS STREET ADDRESS A4487 SE ST LUCIE'S BLVD STREET ADDRESS CITY-ST-ZIP STUART, FL 34987	SIGNATURE	Filing Fee is \$61.25	9. Election Campai	ign Financing	\$5.00 May Be	Make o	check payable to	
CITY-ST-ZIP PT SALERNO, FL 34992  CITY-ST-ZIP Delete TITLE RICCI, DOUG STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE VP HAAGENSON, ROBERT STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE PD STUART, FL 34997  TITLE PD Delete TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE PD Delete TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEEVLIN AARON STREET ADDRESS STREET ADDRESS STREET ADDRESS A4487 SE ST LUCIE BLVD STREET ADDRESS A4487 SE ST LUCIE'S BLVD CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEEVLIN AARON STREET ADDRESS STREET ADDRESS STREET ADDRESS A4487 SE ST LUCIE'S BLVD STREET ADDRESS CITY-ST-ZIP STUART, FL 34987		Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campai Trust Fund Cont	ign Financing Iribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make ( Florida D ES TO OFFICERS AN	check payable to epartment of St	tate
CITY-ST-ZIP PT SALERNO, FL 34992  CITY-ST-ZIP Delete TITLE RICCI, DOUG STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE VP HAAGENSON, ROBERT STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE PD STUART, FL 34997  TITLE PD Delete TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE PD Delete TITLE PD Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEEVLIN AARON STREET ADDRESS STREET ADDRESS STREET ADDRESS A4487 SE ST LUCIE BLVD STREET ADDRESS A4487 SE ST LUCIE'S BLVD CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEEVLIN AARON STREET ADDRESS STREET ADDRESS STREET ADDRESS A4487 SE ST LUCIE'S BLVD STREET ADDRESS CITY-ST-ZIP STUART, FL 34987	10.	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D	9. Election Campai Trust Fund Cont	ign Financing Iribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make ( Florida D ES TO OFFICERS AN	check payable to epartment of St	tate
TITLE NAME RICCI, DOUG STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  ITILE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  ITILE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  ITILE PD RANGER, THOMAS STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  ITILE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  Delete TITLE NAME RANGER, THOMAS STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  ITILE SD SHEVLIN NAME SHEVLIN SHEVLIN AARON STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  ITILE SD SHEVLIN SHEVLIN SHEVLIN STUART, FL 34997  CITY-ST-ZIP STUART, FL 34987  CITY-ST-ZIP STUART, FL 34987  CITY-ST-ZIP STUART, FL 34987  CITY-ST-ZIP STUART, FL 34987	10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE	9. Election Campai Trust Fund Cont	ign Financing Iribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make ( Florida D ES TO OFFICERS AN	check payable to epartment of St	tate
CITY-SI-ZIP  STUART, FL 34997  CITY-SI-ZIP  TITLE  NAME STREET ADDRESS CITY-SI-ZIP  STUART, FL 34997  TITLE  NAME STREET ADDRESS CITY-SI-ZIP  STUART, FL 34997  TITLE  NAME STREET ADDRESS CITY-SI-ZIP  STUART, FL 34997  TITLE  SD  SHEVLIN  ARRON  STREET ADDRESS CITY-SI-ZIP  STUART, FL 34997  TITLE  SD  SHEVLIN  ARRON  STREET ADDRESS CITY-SI-ZIP  STUART, FL 34987  Delete  TITLE  NAME STREET ADDRESS CITY-SI-ZIP  STUART, FL 34987  CHange Addition  NAME STREET ADDRESS CITY-SI-ZIP  STUART, FL 34987  CHANGE STREET ADDRESS CITY-SI-ZIP  STUART, FL 34987  CHANGE  STREET ADDRESS CITY-SI-ZIP  STUART, FL 34987	10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364	9. Election Campai Trust Fund Cont	ign Financing Iribution.   11.  ITILE TR. NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROC 4/75 SE	Make of Florida D ES TO OFFICERS AN  3 4 N  4 LUCIE	check payable to department of St ND DIRECTORS IN Change	tate
HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEVLIN AARON STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEVLIN AARON STREET ADDRESS CITY-ST-ZIP STUART, FL 34987  Delete TITLE NAME SHEWILIN, AARON STREET ADDRESS CITY-ST-ZIP STUART, FL 34987  Change Addition NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34987  CHANGE STREET ADDRESS CITY-ST-ZIP STUART, FL 34987	10.  IITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG	9. Election Campai Trust Fund Cont IRECTORS	ign Financing Iribution.   11.  ITRLE TP. NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROC 4/75 SE	Make of Florida D ES TO OFFICERS AN  3 4 N  4 LUCIE	check payable to department of St ND DIRECTORS IN Change BLV D	10 Addition
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STUART, FL 34997  ITTLE NAME RANGER, THOMAS STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE SD SHELVLIN NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE SD SHELVLIN NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE SD SHELVLIN NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  CITY-ST-ZIP STUART, FL 34997  CITY-ST-ZIP STUART, FL 34987	10.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997	9. Election Campai Trust Fund Cont IRECTORS  Delete	ign Financing tribution.   11.  IIFLE TP. NAME STREET ADDRESS CITY-ST-ZIP  IIFLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees  ADDITIONS/CHANGE  JOHN BROCK  4/75 SE S  STURIKT, F	Make of Florida DES TO OFFICERS AND ST LUCIE	check payable to pepartment of St ND DIRECTORS IN Change	Addition
TITLE NAME  RANGER, THOMAS  STREET ADDRESS CITY-ST-ZIP  TITLE  SD  SHEVLIN AARON  STREET ADDRESS CITY-ST-ZIP  TITLE  SD  SHEVLIN AARON  STREET ADDRESS CITY-ST-ZIP  STUART, FL 34997  TITLE  NAME SHEEF ADDRESS CITY-ST-ZIP  STUART, FL 34987  Delete  TITLE  SD  SHEVLIN AARON  NAME STREET ADDRESS CITY-ST-ZIP  STUART, FL 34987  CITY-ST-ZIP  STUART, FL 34987  CITY-ST-ZIP	10.  ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT	9. Election Campai Trust Fund Cont IRECTORS  Delete	ign Financing Irribution.   11.  ITILE TP. NAME STREET ADDRESS CITY-S1-ZIP  ITILE NAME STREET ADDRESS CITY-S1-ZIP  ITILE NAME STREET ADDRESS CITY-S1-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANGE JOHN BROCK 4/25 SE S STURIKT, FO	Make of Florida DES TO OFFICERS AND ST LUCIEL 349	check payable to pepartment of St ND DIRECTORS IN Change	Addition
STREET ADDRESS CITY-ST-ZIP STUART, FL 34997  TITLE SD SHEVLIN NAME SHEVELIN, AARON STREET ADDRESS CITY-ST-ZIP  TITLE SD SHEVLIN NAME STREET ADDRESS CITY-ST-ZIP STUART, FL 34987  STREET ADDRESS CITY-ST-ZIP STUART, FL 34987  CITY-ST-ZIP STUART, FL 34987  CITY-ST-ZIP	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD	9. Election Campai Trust Fund Cont IRECTORS  Delete	ign Financing ribution.  11.  ITHE TR. NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	check payable to be partment of St ND DIRECTORS IN Change	Addition
CITY-ST-ZIP         STUART, FL 34997         CITY-ST-ZIP           TITLE         SD SHEVLIN         Delete         TITLE         Change         Addition           NAME         SHEET ADDRESS         A487 SE ST LUCIE'S BLVD.         SIREEI ADDRESS         SIREEI ADDRESS           CITY-ST-ZIP         STUART, FL 34987         CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-SI-ZIP	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997	9. Election Campai Trust Fund Cont IRECTORS  Delete	ign Financing pribution.  11.  IITLE TP NAME STREET ADDRESS CITY-SI-ZIP  IITLE NAME STREET ADDRESS CITY-SI-ZIP  IITLE NAME STREET ADDRESS CITY-SI-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	Check payable to pepartment of St ND DIRECTORS IN Change Change Change	Addition  Addition
TITLE SD SHEVLIN Delete TITLE Change Addition  NAME SHEVELIN, AARON NAME  STREET ADDRESS 4487 SE ST LUCIE'S BLVD. STREET ADDRESS CITY-ST-ZIP STUART, FL 34987 CITY-ST-ZIP	10.  ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS	9. Election Campai Trust Fund Cont IRECTORS  Delete	ign Financing Iribution.  11.  IITLE TP. NAME STREET ADDRESS CITY-ST-ZIP  IITLE NAME STREET ADDRESS CITY-ST-ZIP  IITLE VP NAME STREET ADDRESS CITY-ST-ZIP  IITLE IITLE NAME STREET ADDRESS CITY-ST-ZIP  IITLE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	Check payable to pepartment of St ND DIRECTORS IN Change Change Change	Addition  Addition
STREET ADDRESS 4487 SE ST LUCIE'S BLVD. STREET ADDRESS CITY-ST-ZIP STUART, FL 34987 CITY-ST-ZIP	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS 4199 S.E. ST LUCIE BLVD	9. Election Campai Trust Fund Cont IRECTORS  Delete	ign Financing Iribution.  11.  IIILE TR. NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	Check payable to pepartment of St ND DIRECTORS IN Change Change Change	Addition  Addition
CITY-SI-ZIP STUART, FL 34987 CITY-SI-ZIP	ITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	FIling Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS 4199 S.E. ST LUCIE BLVD STUART, FL 34997	9. Election Campai Trust Fund Cont IRECTORS  Delete  Delete  Delete	ign Financing Iribution.  11.  ITILE TP. NAME STREET ADDRESS CITY-SI-ZIP  ITILE NAME STREET ADDRESS CITY-SI-ZIP  ITILE VP NAME STREET ADDRESS CITY-SI-ZIP  TITLE NAME STREET ADDRESS CITY-SI-ZIP  TITLE NAME STREET ADDRESS CITY-SI-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITIKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	Check payable to be partment of St. NO DIRECTORS IN Change Change	Addition  Addition  Addition
	10.  ITTLE NAME STREET ADDRESS CITY- ST-ZIP  ITTLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS 4199 S.E. ST LUCIE BLVD STUART, FL 34997 SD SHEVLIN SHOWLIN, AARON	9. Election Campai Trust Fund Cont IRECTORS  Delete  Delete  Delete	ign Financing Iribution.  11.  IIILE TP. NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITIKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	Check payable to be partment of St. NO DIRECTORS IN Change Change	Addition  Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  STUGAKT, FL 34997	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS 4199 S.E. ST LUCIE BLVD STUART, FL 34997 SD SHEVLIN SHOWLIN, AARON 4487 SE ST LUCIE'S BLVD.	9. Election Campai Trust Fund Cont IRECTORS  Delete  Delete  Delete	ign Financing Iribution.  11.  ITILE TR. NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STUITIKT, FO BERNARD LA	Make of Florida D ESTO OFFICERS AN  A LUCIE  A 349  WBITZ  TLUCIE	Check payable to be partment of St. NO DIRECTORS IN Change Change	Addition  Addition  Addition
STIFEET ADDRESS CITY-ST-ZIP ST-LCA KT, FL 34997	10.  ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS 4199 S.E. ST LUCIE BLVD STUART, FL 34997 SD SHEVLIN SHOWLIN, AARON 4487 SE ST LUCIE'S BLVD.	9. Election Campai Trust Fund Cont IRECTORS  Delete  Delete  Delete  Delete	ign Financing Iribution.  11.  ITHE TR. NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STULITKT, F.	Make of Florida DESTO OFFICERS AND ST LUCIEL 349	Check payable to be partment of St. ND DIRECTORS IN Change Change Change	Addition  Addition  Addition  Addition
	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  RD CHASMAR, GEORGE P.O. BOX 364 PT SALERNO, FL 34992 D RICCI, DOUG 4183 SE ST LUCIE BLVD STUART, FL 34997 VP HAAGENSON, ROBERT 4171 SE ST LUCIE BLVD STUART, FL 34997 PD RANGER, THOMAS 4199 S.E. ST LUCIE BLVD STUART, FL 34997 SD SHEVLIN SHOWLIN, AARON 4487 SE ST LUCIE'S BLVD.	9. Election Campai Trust Fund Cont IRECTORS  Delete  Delete  Delete  Delete	ign Financing Iribution.  11.  ITHE TR. NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG JOHN BROCK 4/75 SE S STULITKT, F.	Make of Florida DESTO OFFICERS AND ST LUCIEL 349	Check payable to be partment of St. ND DIRECTORS IN Change Change Change	Addition  Addition  Addition  Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all parter like empowered.

SIGNATURE: N

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

772-575-4927