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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

rincipal Plac	e of Business	Mailing Add	dress						 [
2050 ATLAN	TIC AVE.		ANTIC AVE.			1			
	BEACH FL 32951		INE BEACH F	L 32951					
						3. Date Incorporated or	Qualified	3a. Date of Las	t Report
Principal P	lace of Business	2a. Mailing	Address			06/23/1982		05/01/	1995
		26	Address			4. FEI Number 59-2266305			Applied Fo
Suite, Apt.	#, etc.	Suite, A	pt. #, etc.					\$8.7	Not Applica 5 Additiona
City & Stat	^	27				5. Certificate of Status I	Desired		Required
July a Stat	е	Orty & S	State			6. Election Campaign F		\$5.0	OO May Be
Zφ	Country	Zip		Country		Trust Fund Contribut	IOI I	Add	ed to Fees
	25	29		30		This corporation has Florida Statutes		angible tax under s Yes 🔲 No	s. 199.032,
	9. Name and Address of C	urrent Registered Ag	ent			10. Name and Address			
0015	10t in			81	Name	Mism Byn	~		
COLE, J				82	Street Addr	ess (P.O. Box Number is No	l Acceptable)		
STE 421	LANTIC AVE			83	210	1 ATTINY	<u>ارد 5</u>	1. 753	24/
	JRNE BCH FL 32951			-					
				84	City	Sower Bck ation submits this statement		FL 85 Z	ip Code
Pursuant	to the provisions of Sections 617	.0502 and 617.1508, F	lorida Statute	s, the above na	imed corpor	ation submits this statement	for the purpos	FL 3	295
orregister						· · ·	ior the parpos	ment as renisterer	registereur anent La
tamiliar wi	th, and accept the poligations of	Section 517.6503.	was authorize rida St atuteka	by the corpor	ration's boar	d of directors. I hereby accep	ot the appoint	mont do registerat	a agont. Ta
tamiliar wi NATURE	to the provisions of Sections 617 red agent, or both, in the State of th, and accept this abligations of	-11 101	was authorize nda Satura	by the corpor	ration's boar	d of directors. I hereby accep	ot the appoint	ment da registorat	agont. ra
tamiliar wi NATURĘ <mark>∕</mark>	Signature, typed or printed hance of registere	diagent and bile it is placety	4	E. Registered Agent s		I when reinstating:		DATE	
familiar wi	Signature, typed or printed hence of registere OFFICER	d agent and title if a plication S AND DIRECTORS	(NOT	E. Registered Agent s	signature recures)	when reinstating: ADDITIONS OF IANGE		DATE	
familiar wi	Signature, typed or printed name of registers OFFICER D	d agent and title if a plication S AND DIRECTORS	4	E Registered Agent's 13. 11 TITLE	signature recorrec	ADDITIONS OF LANGE		DATE	DRS IN 12
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SIGNATURE: X JURILLE IN TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone **i**r

Date