	ONPROFIT RPORATION UAL REPORT 1996	Sand Sec	EPARTMENT OF ST dra B. Mortham pretary of State OECORPORATION					
DOCU 1. Corporation	MENT # 7676	37 (2)						
•	TORIDA WORKFORCE D	• •	IATION, I) 			t 010s 210)) 100s
Principal Place	e of Business	Mailing Address						
109 8TH AVENUE SHALIMAR FL 32579 US		109 8TH AVENUE SHALIMAR FL 32579 US	109 8TH AVENUE SHALIMAR FL 32579		ann aran aran aran aran aran aran aran			
9 Principal P	flace of Business	T			3. Date Incorporated or Qualified 03/23/1983		te of Last 09/05/1	Report 995
1		2a. Mailing Address			4. FEI Number 59-2467722	· .h		Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	ХX	\$8.75	Not Applicable Additional
City & Stati	е	City & State			6. Election Campaign Financing			Required May Be
Zip	Country	28 Zip	Country		Trust Fund Contribution 8. This corporation has liability for	intendible to	Adde	d to Fees
8	25 9. Name and Address of Cu	29 Prrent Registered Agent	30			Yes []	No	199.032,
13770 5	r, Sarah K. 18th Street North		82	Name Street Addi	lary Lou Reed ess P.O. Box Number is Not Acceptal 09 8th Avenue	ble)		-
13770 5 Suite 3 Clearw	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.C red agant, or both, in the State of the provisions of the prov	lee .	82 S 83 84 C utes, the above-namized by the corporales.	Street Adding St	Shalimar ation submits this statement for the put of directors. I hereby accept the app	FL irpose of char pointment as r	85 Zip 32 nging its re egistered	Code 15.7.9 egistered offic agent. I am
13770 5 SUTE 3 CLEARM 11. Pursuant or register familiar with SIGNATURE 12.	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the and accept the orlingations of Signature type of perfect name of registered OFFICERS	lee .	82 S 83 84 C	Street Adding St	Shalimar ation submits this statement for the put of directors. I hereby accept the app 6/28/96	FL Irpose of char ointment as r	nging Its registered	579 egistered offic agent. I am
13770 5 SUITE 3 CLEARM 11. Pursuant or register familiar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in rip State of the and accept the offications etc. Signalure typeoff perfect name of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL	AND DIRECTORS	82 S 83 84 C utes, the above-namized by the corporates. NOTE: Registered Agent signal. 1.1 TITLE 1.2 NAME 1.3 STREET ADE	Street Addy S City med corporation's boar	ation submits this statement for the put of directors. Thereby accept the app 6/28/96 when reinstatings: ADDITIONS CHANGES TO OFF	FL Irpose of char pointment as r DATE	nging Its registered	579 egistered offic agent. I am
13770 5 SUITE 3 CLEARM 11. Pursuant 1 or register familiar will SIGNATURE 12. ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 Sections of Sections 617.0 OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD	AND DIRECTORS	B2 S B3 S B4 C Utes, the above-namized by the corporates. NOTE: Registered Agent signal. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADE 1.4 CITY-ST-ZI 2.1 TITLE	Street Addy S City med corporation's boar	ation submits this statement for the purid of directors. Thereby accept the approximation of the submit of the sub	FL irpose of char pointment as r DATE TICE HIS AND	nging its registered	egistered offic agent. I am
13770 5 SUITE 3 CLEARM 11. Pursuant 1 or register tamiliar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both in ring State of its and accept the obligations etc. Signature type of perhad name of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH 3403 NW 82 AVE	Deltard the Father seic (A) AND DIRECTORS AND DIRECTORS TOBLETE RTH, SUITE 312	82 S 83 S 84 C 85 S 86 S 87 S 88	Street Addy S City med corporation's board ghalure required DRESS TIP The street Addy PD Re P	ation submits this statement for the put of directors. Thereby accept the app 6/28/96 when reinstatings: ADDITIONS CHANGES TO OFF	FL irpose of char pointment as r DATE TICE HIS AND	aging its registered DIRECTO	egistered office agent. I am FIS IN 12 Addition
13770 5 SUITE 3 CLEARM 11. Pursuant 1 or register familiar will SIGNATURE 12. ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME AME	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in his State of the and accept the obligations etc. Signature typeofr perfed name of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH	AND DIRECTORS AND DIRECTORS TOBLETE RTH, SUITE 312	B2 S B3 B4 C Utes, the above-namized by the corporal es. NOTE: Registered Agent signals. 1.1 Title 1.2 NAME 1.3 STREET ADE 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZI 2.4 CITY-ST-ZI	Street Addy S City med corporation's board gnature required PD Re PD R	ation submits this statement for the pure dof directors. I hereby accept the approximation of the pure following of the pure for the pure following of the	FL irpose of char pointment as r DATE TICE HIS AND	aging its registered DIRECTO	egistered office agent. I am FISUR 12 Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register tamiliar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME AME AME AME AME AME	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the and accept the orlingations of Signature typeoff perhadrane of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH 3403 NW 82 AVE MIAMI FL VO REED, MARY LOU	Deltard the Father seic (A) AND DIRECTORS AND DIRECTORS TOBLETE RTH, SUITE 312	B2 S B3 S B4 C B4 C B4 C B4 C B5 B4 C B5 B4 C B6 B5 B6 B7 B6 B7	Street Addy Street Addy S City med corporation's board gnature required PD Re PD Re PO Re ORESS CIP VD Gr	ation submits this statement for the pure d of directors. I hereby accept the approximation of the pure following of the pure follow	FL ripose of char pointment as r	ging its registered EMERICAL () Change	egistered office agent. I am FIS IN 12 Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant 1 or register tamiliar will SIGNATURE 12. ITLE AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP TLE	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the and accept the orlingations of Signature typeoff perhad name of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH 3403 NW 82 AVE MIAMI FL	AND DIRECTORS AND DIRECTORS TOBLETE RTH, SUITE 312	B2 S B3 S B4 C B4	Street Addy Street Addy S City med corporation's boar gnature required PD Re PD Re ORESS ZIP VD GT ORESS 341	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	FL Irpose of char DATE ICERS AND X	ging its registered EMERICAL () Change	egistered office agent. I am FIS IN 12 Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE TREET ADDRESS ITY-ST-ZIP TLE TREET ADDRESS ITY-ST-ZIP TLE	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the add accept the obligations of Signature typeoff perhadrane of registered Signature typeoff perhadrane of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH 3403 NW 82 AVE MIAMI FL VD REED, MARY LOU 109 8TH AVENUE SHALIMAR FL TD	AND DIRECTORS AND DIRECTORS TOBLETE RTH, SUITE 312	B2 S B3 S B4 C B4 C B4 C B4 C B4 C B5 B4 C B5 B	Street Addy Street Addy S City med corporation's boar gnature required PD Re PD Re ORESS ZIP VD GT ORESS 341	ation submits this statement for the pure d of directors. I hereby accept the approximation of the pure following of the pure follow	FL propose of char continent as r DATE TICERS AND X Ay, Sui	ging its registered EMERICAL () Change	egistered office agent. I am FIS IN 12 Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the provisions of Sections 617.0 red agent, or both, in the State of the provisions of Sections 617.0 red agent, or both, in the State of the provisions of Sections 617.0 red agent, or both, in the State of the provisions of Sections 617.0 Signature typeout perfect name of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH 3403 NW 82 AVE MIAMI FL VD REED, MARY LOU 109 8TH AVENUE SHALIMAR FL TD ELZEY, LEE	DELETE	B2 S B3 S B4 C	Street Addy Street Addy S City med corporation's board alion's board PD Re 10 Re 10 Sh DRESS ZIP VD Gr 344 Jen	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	FL propose of char continent as r DATE TICERS AND X Ay, Sui	nging its registered DIRECTO Change Change	egistered office agent. I am FIS IN 12 Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar will SIGNATURE 12. TILE AME TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the add accept the obligations of Signature typeoff perhadrane of registered Signature typeoff perhadrane of registered OFFICERS PD SNYDER, SARAH K 13770 58TH STREET NOR CLEARWATER FL VD ALFANO, JOSEPH 3403 NW 82 AVE MIAMI FL VD REED, MARY LOU 109 8TH AVENUE SHALIMAR FL TD	SAND DIRECTORS SAND DIRECTORS TOBLETE TH, SUITE 312 DELETE DELETE	B2 S B3 S B4 C B4 C B4 C B4 C B5 B4 C B5 B5 B4 C B6 B5 B6	Street Addy Street Addy S City med corporation's boardation's boardat	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	FL propose of char continent as r DATE TICERS AND X Ay, Sui	nging its registered DIRECTO Change Change	egistered office agent. I am FIS IN 12 Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar will SIGNATURE 12. TILE AME TREET ADDRESS TITY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Secti	DELETE	B2 S B3 S B4 C Utes, the above-namized by the corporal es. NOTE Registered Agent signal sign	Street Addy Street Addy S City med corporation's boardation's boardat	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	PL ripose of char sointment as r DATE FICE RIS AND Ay, Sui	nging its registered DIRECTO Change Change	egistered office agent. I am FIS IN 12 Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar with silican street address ity-st-zip TILE AME TREET ADDRESS TY-ST-ZIP TILE TREET ADDRESS	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Secti	SAND DIRECTORS SAND DIRECTORS TOBLETE TH, SUITE 312 DELETE DELETE	B2 S B3 S B4 C	Street Addy Street Addy S City med corporation's board alion's board PD Re 10 Sh DRESS ZIP VD Gr 344 Jen DRESS P	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	PL ripose of char sointment as r DATE FICE RIS AND Ay, Sui	DIFFECTOR Change Change Change	egistered office agent. I am FIS IN 12 Addition Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Secti	DELETE DELETE DELETE DELETE DELETE DELETE	B2 S B3 S B4 C Utes, the above-namized by the corporates. NOTE Registered Agent signs of the corporates. 13. I.1 TIFLE 1.2 NAME 1.3 STREET ADE 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZI 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZI 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIF 5.1 TITLE 5.2 NAME 5.3 STREET ADD 5.4 CITY-ST-ZIF 5.3 STREET ADD 5.5 CITY-ST-ZIF 5.5 STREET ADD 5.5 S	Street Add	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	PL Irpose of char pointment as r DATE TICERS AND A A B A B A B B C C C C C C C C C C C	DIFFECTOR Change Change Change	egistered office agent. I am FISTIN 12 Addition Addition Addition Addition
13770 5 SUITE 3 CLEARM 11. Pursuant to register familiar will SIGNATURE 12. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS	STH STREET NORTH 12E VATER FL 34620 to the provisions of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Sections 617.0 red agent, or both, in the State of the day accept the obligations of Sections of Secti	SAND DIRECTORS SAND DIRECTORS TOBLETE TH, SUITE 312 DELETE DELETE	B2 S B3 S B4 C Utes, the above-namized by the corporates. NOTE Registered Agent signs of the corporates. 13. I.1 TIFLE 1.2 NAME 1.3 STREET ADE 2.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZI 3.1 TIFLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZI 4.1 TIFLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIF 5.1 TIFLE 5.2 NAME 5.3 STREET ADD	Street Add	ation submits this statement for the pure dof directors. Thereby accept the approximation of the pure following accept the approximation of the following accept the approximation of the following accept the pure following acce	PL Irpose of char pointment as r DATE TICERS AND A A B A B A B B C C C C C C C C C C C	DIFFECTOR Change Change Change	egistered office agent. I am FIS IN 12 Addition Addition Addition

PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

6/28/96 Date:

Daytime Pt one #

SIGNATURE: