FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

29

9. Name and Address of Current Registered Agent

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

Corporation Name

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DOCUMENT #

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WVP II	IMPLA	CHUII	LAMMEAN	4 T

WEIGHINATION COM	OI I		
Principal Place of Business	Maling Address	100101 FE311 OB411 OD131 11910 FEBU	i Ajuk dubak didir didir Ajbut dubir didir ida
8650 HASTINGS BLVD. P O BOX 486	B650 HASTINGS BLVD. P O BOX 486		
HASTINGS FL 32145-5544	HASTINGS FL 32145-5544	 Date Incorporated or Qualified 01/01/1932 	3a. Date of Last Report 02/20/1995
2. Principal Place of Business 21	28. Mailing Address 26	4, FE! Number 59-0506651	Applied For Not Applicat
Suite, Apt. #. etc.	Suite, Apt. #, etc.	5, Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & State	City & State	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees

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COTTON, WILLIAM 8650 HASTINGS BLVD. HASTINGS FL 32045

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		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
ountry		This corporation has liability for Florida Statutes	or intangible t es \[\] No	ax under s 199.032,	
		10. Name and Address of New	Registered	Agent	
81	Name				
82	2 Street Address (P.O. Box Number is Not Acceptable)				
83					
84	City		FI	85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. 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 607.0505, Florida Statutes.

2.	Supportion, type of our product name of registered agont and the it applicable. INOT OFFICE IS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			RS IN 12
 	PD	DELETE	1. 1 TIFLE		☐ Change	Addition
ME .	COTTON, WILLIAM R.		1.2 NAME			
KELLADORESS	8650 HASTINGS BLVD.		13 STREET ADDRESS			
(S' 78'	HASTINGS FL		1.4 CHTY - ST- ZIP			
F	VO	[] DELETE	2 1 TITLE		☐ Change	Addition
.t	BILLINGS, MARIAN S.		2 2 NAME			
-	- 58 COURT NW		2 3 STREET ADDRESS			
Y 81-201	LOWELL FL		2 4 C(TY - ST - ZIP			E 1440
F	D	DELETE	3. 1 TITLE		Change	Addition
:	LEONARD, PHYLLIS E.		3 2 NAME			
RELLADDRESS	25 STATE RD. #13		33 STREET ADDRESS			
Y ST 7P	JACKSONVILLE FL		3.4 CIFY - ST - ZIP			- 1223 av
LF	TSD	DELETE	4 1 TITLE		☐ Change	Addition
Ис	COTTON, MARY P.		4.2 NAME			
HELADORESS	8650 HASTINGS BLVD.		4.3 STREET ADDRESS			
Y - ST - ZIE	HASTINGS FL		4.4 CITY - ST - ZIP		F3 0>	Addition
LF	D	DELETE	5 1 TITLE		🙀 Change	L ADDITION
7 E	LEONARD, GREGORY		5.2 NAME			
€+ LADDRESS	46 ROSCOE BLVD		5 3 STREET ADDRESS	49 S. Roscoe Blvd.		
Y \$1 7.F	PONTE VERDA BEACH FL		54 CITY - ST - ZIP		D Change	☐ Addition
LF		☐ DELETE	6 1 TITLE		☐ Change	☐ XOULER
∕⁄i			6.2 NAME			
HELL ADORESS			63 STREET ADDRESS			
ITS ST AR	\		6 4 CITY - ST - ZIP			

14. 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, I further 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 early that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Mary P. Cotton, Treas.

02/13/96

Date

904-692-1941

Daytime Phone #

Applied For Not Applicable