## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 848041

(0)

**NIDA TRAINER CORPORATION** 

Principal Place of Business Mailing Address 300 S. JOHN RODES BLVD. 300 S. JOHN RODES BLVD. MELBOURNE FL 32904 MELBOURNE FL 32904-1008 3a. Date of Last Report 01/22/1996 3. Date Incorporated or Qualified 01/23/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 06-0884221 21 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Ш Added to Fees Žιρ Country Country Zip 8. This corporation has liability for intangible tax under s. 199,032, 25 29 30 Yes No 24 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 NOHRR, P. P., ESQ Name Nohrr, P.P., Esq Street Address (P.O. Box Number is Not Acceptable) 1800 West Hibiscus, 100 RIALTO PLACE, SUITE 800 82 **MELBOURNE FL 32901** P.O.Box 369 83 84 City Zip Code 32901 Melbourne 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. SIGNATURE Signature, typed or printed name of registered agent and title I applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Titie DELETE 1.1 TITLE Change Addition HUMMEL CAROL ANN NAME 1.2 NAME Carol Ann Weiss 300 JOHN RODES BLVD. STREET ADDRESS 1.3 STREET ADDRESS (name change) MELBOURNE FL CITY-ST-ZIP 1.4 CITY-ST-ZiP DELETE Addition TITLE 2.1 TITLE Change VETRANE, DAVID NAME 2.2 NAME **30 ARDEN LANE** STREET ADDRESS 2.3 STREET ADDRESS STAMFORD, CT 00000 CITY - \$1 - 71P 2 4 CITY - ST- ZIP XXXXXXETE TITLE 3.1 TITLE Change Addition **GUDELIS, DRASUTIS** NAME 3.2 NAME 300 JOHN RODES BLVD STREET ADDRESS 3.3 STREET ADDRESS MELBOURNE FL CITY - ST - ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition BEAUSEIGNER, JOSEPH NAME 4. 2 NAME 300 JOHN RODES BLVD STREET ADDRESS 4.3 STREET ADDRESS MELBOURNE FL CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE THE 5.1 TITL€ Change Addition MAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 FITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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.

COY-SI-ZP

audlan Weiss Chille Carol Ann Weiss

407-727-2265

**FILED** 

Feb 12 1997 8:00am

Secretary of State

(96/6)