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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS (0)

FILED Jan 23, 1996 08:00 AM **Secretary of State**

| DOCUMENT # . Composition Name | F0230 |
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| i anopat Piace of | tres co., inc. | Mailing Address | | | | | |
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| 6320 DANNER DRIVE 6320 DANNER DRIVE SARASOTA FL 34240 SARASOTA FL 34240 | | | | | | | |
| | | | | | 3. Date incorporated or Qualified 10/20/1980 | 3a. Date of La 01/20 | |
| . Principal Paro | e of Business | 2a. Mai'ing Address | | | 4, FEI Number 36-2611376 | | Applied For Not Applicable |
| Suite, Apt. #, | eto | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | 1 1 | .75 Additional Fee Required |
| Oty & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | | 5.00 May Be |
| Ζφ | Country 25 | Ζ _Ι μ. | Countr | ry | 8. This corporation has liability for it Florida Statutes | ntangible tax und | |
| | 9. Name and Address of Curre | | | | 10. Name and Address of New R | | ŧ |
| | | | 8 | 1 Name | THE PERSON OF PARTY PART | | - |
| WILKES, F | | | 8: | 2 Street Add | ress (P.O. Box Number is Not Acceptable | le) | |
| 6320 DANNER DRIVE SARASOTA FL 34240-6399 | | | 8: | 3 | | | |
| | | | 8 | 4 City | | FL 85 | Zip Code |
| GNATURE : | , and accept the obligations of, Sec profess by a coprocursor of regalact again. Of FICERS Ar | | VOTE: Rugistered Ag | jer) signature require | od when reinstatogi ADDITIONS/CHANGES TO OFFI | DATE ICERS AND DIRE | CTORS IN 12 |
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| ST ZiP | SARASOTA FL DST | T DELETE | 1.4 CITY | | | | |
| | WILKES, CLARA L. | | | t I | | F-7 0 | |
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| | | | 2.2 NAME | E | | [] Cha | ange 🔲 Additio |
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certify that the information indicated on this annual report is supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Book 13 if changed, or on an attachment with an address.

ILLES CLARA L. WILKES
RINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-96 941-377-0020