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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1996			Secretary of State DIVISION OF CORPORE			ONS						
DOCUN 1. Corporation	/ENT #	F05414	(0)									
,	MUNITY FIRST	RANK										
CON	10111111101	DANN						1 10 8 11 10 8 11 11 8 13 1		111 A141 A111 A1		
Principal Place	of Business		Mailing Address									
3740 BEACH BLVD. 3740 BEA							j					
SUITE 101 JACKSONVILLE FL 32207			SUITE 101	SUITE 101 JACKSONVILLE FL 32207			j					
JACKSONV	ILLE PL 3220/		JACKSUNVILLE PL 3	2201			<u> </u>	3. Date Incorporated or	Qualified	3a. Date o		
								11/14/1980		0	5/01/1	
2. Principal Pla	ce of Business		2a. Mailing Address				i	 FE! Number 59-203802 	3		→	Applied For
Suite, Apt. #	l etc		Suite. Apt. #, etc.								سلساب	Not Applicable Additional
22	, 5.5.	1	27					5. Certificate of Status	Desired		,	Required
City & State			City & State					6. Election Campaign F	-	П	\$5.00	May Be
23			28	······				Trust Fund Contribut				d to Fees
Zip 24	25 Cou	· · ·	Z₁p !9	30	untry			 This corporation has Florida Statutes 		intangible tax⊪ ☐ No	under s	199.032,
(4)		ress of Current Re		30	Т			0. Name and Address			ent	<u>-</u>
					81	Name				- <u>-</u>		
BELL, HARRY J.					82	Street A	Address	(P.O. Box Number is No	t Acceptat	ole)		
3740 BEACH BLVD.						Olloct	1001033	(. c. 26x / di/ loc 10 / 10	ч чосорыя.			
JACKSONVILLE FL 32207					83							
					84	City					85 Zıç	o Code
	. <u> </u>					L				FL		
 Pursuant to or registere 	o the provisions of Se ed agent, or both, in t	ctions 607.0502 and he Stat∈ of Florida. S	l 607.1508, Florida Statute Such change was authorize 507.0505, Florida Statutes.	s, the ab d by the	ove-r corp	named cor oration's t	rporation board of	n submits this statement Edirectors. I hereby acce	tor the pui pt the app	rpose of chang ointment as re	ng its n gistered	egistered office Lagent, Lam
familiar with	h, and accept the obl	igations of, Section 6	607.0505, Florida Statutes.									
SIGNATURE _	Signature, typed or printed na	tie of regis ered agent and to	tte if applicable (NOT	E Registere	d Agen	nt signature re-	vyvired whe	n reinstahng)		DATE:		
12		OFFICERS AND DI		13.				ADDITIONS/CHANG	ES TO OFF	ICERS AND D	IRECTO	RS IN 12
TITLE	DC		☐ DELETE	1.1	TITLE						Change	☐ Addition
NAME	DEMETREE,			1.2 /	IAME							
STREET ADDRESS	3740 BEACH			1.3 5	STREET	ADDRESS						
COLY - S1 - ZIP	JACKSONVIL	LE FL			HY-S	ST - ZIP						
TITLE	D		DEFELE	2. 1	TITLE						Change	☐ Addition
NAME	GAY, W.W.	OLI OTREET			NAME							
STREET ADDRESS	524 STOCKT					ADDRESS						
CITY-S1-ZIP	JACKSONVIL PD	LE FL	□ DELETE		CITY-S						Change	[] Addition
TITLE		HADDOUN	☐ DELETE		TITLE					u	Change	☐ Addition
NAME	TOSH, A. RIC 3740 BEACH				NAME							
STREET ADDRESS	JACKSONVIL					1 ADDRESS						
CITY-ST-ZiP THLE	D	<u></u>	DELETE	_	TITLE	ST- ZIP				<u></u>	Change	☐ Addition
NAME	BULLARD, R.	H JR	C) bearing		NAME						·	.
STREET ADDRESS	2208 CHERY			1		ADDRESS						•
CITY - S1 - ZIP	JACKSONVIL					ST-ZIF						
TIJLE	D		DELETE		TITLE						Change	Addition
NAME	MASSEY, RO	Bert B.		5.21	NAME							
STREET ADDRESS	2434 ATLANT			533	STREET	ADDRESS						
CITY-ST-7IP	JACKSONVIL	LE FL		541	CITY - S	ST-ZIP						
TITLE	VS		☐ DELE3E	6.1	TITLE						Change	Addition

14. I do hereby certify that the information indicated on 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 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 Block 13 if changed, or on an attachment with an address.

6.4 CITY - ST - ZIP

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CHTY-ST-ZIP

SIGNATURE: SIGNATURE SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BELL, HARRY J.

3740 BEACH BLVD

JACKSONVILLE FL

4)17/96 904 396 1182 Dare Christine Prone 1

CR2E034 (12/95)