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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED
May 14 1997 8:00am
Secretary of State

rincipal Piace EGENCY SOUA 152 SE FED HI TUART FL 349 S	ARE WY	Mailing Address REGENCY SQUARE 2452 SE FED HWY STUART FL 34994-4531 US		3. Date Incorporated or Qualified	<b>3a.</b> Da	ite of Last	Report
. Principal Pla	ace of Business	2a. Mailing Address		11/03/1981 4. FEI Number	<b>U</b> D/U	)1/1996	Applied For
	acc or Passings	26		59-2142568		-	Not Applicable
Suite, Apt #	t, etc	Suite, Apt. #, etc.		Certificate of Status Desired		\$8.75	Additional Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution			O May Be
Zip	Country	Zıp	Country	8. This corporation has liability for			r s. 199.032,
l	25 9. Name and Address of Current	29	30	Florida Statutes  10. Name and Address of New Re	Yes [		
3038	SON, AUDREY S. FEDERAL HIGHWAY ART FL 33497		81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)		
			B4 City		FL	<b>85</b> Zi	p Code
agent ∔an _ agent∔an	if familiar with, and accept the obliga	itions of, Section 607.0505, F	lorida Statutes.	rporation submits this statement for the pation's board of directors. I hereby accept			
agent tan HGNATURE _ 2.	of standar with, and accept the obligation of th	nt and title if applicable. (NC)  DIRECTORS	Provide Statutes.  Provide Statutes.  TE: Registered Agent signature requirements.		DATE	DIRECTO	ORS IN 12
agent + an IGNATURE =  2.  THE  AME  IREET ADDRESS	if farminar with, and accept the obligation of registered ago.  OFFICERS AND	nt and title if applicable. (NC	PTE: Registered Agent signature required 13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	jured when reinstating)	DATE		ORS IN 12
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agent 1 an IGNATURE 2. ILE AME INTEL AUDRESS ITY-SU-7IP ILE AME INTEL ADDRESS	Signature, typed or period name of registered age OFFICERS AND PD HOPSON, AUDREY 3038 S. FEDERAL HIGHWAY STUART FL STD DAVIS, VICKI H. 1720 SW WILDCAT TRAIL STUART FL	ations of, Section 607.0505, Fint and tile if applicable (NC) DIRECTORS  DELETE  DELETE	PTE: Registered Apent signature requing 13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	jured when reinstating)	DATE	☐ Chang	DRS IN 12 e
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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 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name 607, F