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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

. Corporation	MENT # <b>F659</b> RESOURCES, INC.	974 (0)				
Principal Place of Business Mailing Address  ** ELLI M.A. MILLS		Mailing Address % ELU MA. MILLS	WF 600			
LARGO FL 3	= :	801 W. BAY DRIVE, SU LARGO FL 34640-0223	ne au	3. Date Incorporated or Qualified 02/04/1982	3a. Date of Last Re 04/28/19	
Principal Pla	ice of Business	2a. Mailing Address 26		4. FEI Number 59-2164503		Applied For Not Applicable
Suite, Apt.#	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	11 7 7	Additional Regulred
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	<b>\$5.0</b>	O May Be d to Fees
Z <sub>(j)</sub>	Country 25	Zip 29	Country 30	8. This corporation has liability for Florida Statutes Yes		
	9. Name and Address of Cur	rrent Registered Agent	24	10. Name and Address of New F	tegistered Agent	
MILLS, ELLI M.A. 801 WEST BAY DR LARGO FL 34640		81 Name				
			82 Street Add	Iress (P.O. Box Number is Not Acceptab	ole) 	
			<b>84</b> City		- 85 Zi	p Code
		,			FL _	
or registere	ed agent, or both, in the State of F h, and accept the obligations of S			pration submits this statement for the pur and of directors. I hereby accept the app		
or registere familiar with SiGNATURE 12.	h, and accept the obligations of S signature typedo pilited name of rejistered a	Tondar Such change was authorized Section 607.0505, Florida Statutes. Reprise of the Taylor the (NOTE AND DIRECTORS	d by the corporation's boar Registered April signature require 13.	and of directors. I hereby accept the app	DATE  ICERS AND DIRECTO	PRS IN 12
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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 arr an officer or director of the corporation of he 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 12 if changed, or on an adjustment with an address.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR M.A. MILLS 2/22/96