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 # F75152

(1)

GRADY W. WHITE, P.A.

FILED Apr 04 1997 8:00am Secretary of State

	(818 818 11 8 18 14 818 11 188

Principal Place of Business W. ELIZABETH T. KEGERREIS 121 E. HIBISCUS BLVD. MELBOURNE FL 32901		% (121	Mailing Address W ELIZABETH T. KEGERREIS 121 E. HIBISCUS BLVD. MELBOURNE FL 32801-3102			C 19881198 (17) (1886) Siver right Siver right Siver Siver Siver Siver Siver Siver				
			,				3. Date Incorporated or Qualified 04/06/1982	3a. Da 01/2	te of Last 3/1996	Report
2. Principal P	ace of Business	h	Mailing Address				4. FEI Number		——	Applied For
21		26					59-2248216			Not Applicable
Suite_Apt.	# etc.	<u> </u>	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
22		27	City & State			<u></u>				······································
City & State	9		City of State				6. Election Campaign Financing Trust Fund Contribution			May Be
23] Zip	Country	28	Zip	Count	rv		8. This corporation has liability for			
24	25	29	2.17	30	,		Florida Statutes	Yes 🔽	No	6. 188.032
241	9. Name and Address of Cui		tered Agent	1301		:	10. Name and Address of New Re			
KEG	erreis, Elizabeth T.	. 		8	1	Name				
	E. HIBISCUS BLVD.			ä	2	Chroat Add	ress (P.O. Box Number is Not Acceptat	اماد		
	BOURNE FL 32901			٥	~	Street Addi	iress (P.O. Box Number is 140) Acceptac	не)		
***************************************	DO01#12 1 2 0000 1			8	3	•				
				Ļ	_				Tan 1 2	in Code
				8	4	City		FL	65 Zi	ip Code
agent La SiGNATURE	m familiar with, and accept the ol						ation's board of directors. I hereby accelured when reinstaing)	DATE		
12,		AND DIREC		13.	_		ADDITIONS/CHANGES TO OFFICE	CERS AND	DIRECT	ORS IN 12
TITLE	P	, , , ,	DELETE	1.1 TITL	:				Chang	ge Addition
NAME	WHITE, GRADY W			1.2 NAM	E					
STREET ADDRESS	121 E HIBISCUS BLVD			1.3 STRE	ET A	ADDRESS				
CHY-ST-ZIP	MELBOURNE, FL 00000			1.4 CITY	- 51	r-ZIP				
TILLE			DELETE	2.1 TITL	-				☐ Chang	ge Addition
NAME				2.2 NAM	E					
STREET ADDRESS				2.3 STRi	ET .	ADDRESS				
CITY - S1 - Z0F		-		2. 4 C(T	(-S	J-ZIP				
TOTE			☐ DELETE	3 1 TITL	Ε				L Chang	ge Addition
NAME				32 NAM	E					
STREET AUDRESS				3 3 STRI	ET.	ADDRESS				
CITY-SI-7P				34. CIT		T-ZIP			T 1 61	. Addition
THILE			☐ DELETE	4.1 TITL					L Chang	ge L Addition
NAME				4. 2 NA						
STREET ADDRESS						ADDRESS				•
CHY-51-20			DELETE	4.4 CITY		T-ZIP			Chang	ge Addition
TILF			DELETE	5.1 TITL						le F"1 Montion
NAVE				5.2 NAN		IDDDCCC				
STREEL ADDRESS						ADDRESS				
C/1Y - ST - Z/P			☐ DELETE	5.4 CIT) 6.1 TITL		1-ZIP			Chang	ge
THLE			L DULLE						Ullulity.	y
NAME CONTRACTOR				62 NAN		*PODEC				
STREET ADDRESS						ADDRESS				
City-St-7iP	h and the information our	unlined with t	his filing door oot au	6.4 CITY			ad in Section 119 07(3)(i). Florida Statut	es I furthe	r certify th	hat the

Too hereby comy that the information supplied with this filing does not quality 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 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, over an adapter.

SIGNATURE: