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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

, , , ,	1996		ary of State CORPORATIONS		
DOCUI	MENT # F9126	8 (5)			
•	NENTAL STRUCTURES, IN	C.			
Principal Place	of Business	Mailing Address		{	0))
3340 SCHERE		3340 SCHERER DR.			
ST. PETERSB	URG FL 33716	ST. PETERSBURG FL 3	3716		
				 Date Incorporated or Qualified 07/20/1982 	3a. Date of Last Report 04/17/1995
	ace of Business	2a. Mailing Address		4, FEI Number	Applied For
Suite, Apt.	#, etc.	26 Suite, Apt. #, etc.		59-2218099	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	;	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	ZID	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees
24	25	29	30	Florida Statutes Yes	
	g. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
GEHRAN	ID WILLIAM A				
GEHRAND, WILLIAM A. 3340 SCHERER DRIVE			82 Street Addr	ess (P.O. Box Number is Not Acceptable	9)
	ERSBURG FL 33716		83		
			84 City		85 Zip Code
			'		- FL `
or registere	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor	2 and 607.1508, Florida Statute ida. Such change was authorize	s, the above named corpored by the corporation's boar	ation submits this statement for the purp rd of directors. I hereby accept the appo	ose of changing its registered office numbers as registered agent. Lam
	h, and accept the obligations of, Sec	tion 607.0505, Florida Statutes.		, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE _	Signature, typed or primon name of registered ago:	takiste (a, o , ab) (NO)	E. Registered Agent signature require	t which recordaing	£9A'E
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE NAME	VD Houk, Florence S.	• DELETE	T. 1 TITLE		Change 🔲 Addition
STREET ADDRESS	3340 SCHERER DRIVE		1.2 NAME		
CITY-ST-ZIP	ST. PETERSBURG FL		1.3 STREET ADDRESS 1.4 CITY-SE ZIP		
TITLE	PD	DELETE	2 1 TITLE		Change Addition
NAME	GEHRAND, WILLIAM A.		2.2 NAME		
STREET ADDRESS	3340 SCHERER DRIVE		2.3 STREET ADDRESS		
CITY - ST - ZIP	ST. PETERSBURG FL		2 4 CiTY - \$T - ZIP		
TITLE	std Gehrand, Gerald	DELETE	3 1 TITLE		Change Addit-on
NAME STREET ADDRESS	3340 SCHERER DRIVE		3.2 NAME		
CITY-ST-ZIP	ST. PETERSBURG FL		33 SIREET ADDRESS		
TITLE		DELETE	3.4 CITY - ST - Z-P 4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		=== 0.00 10.00	4 4 CHY - ST - ZIP		
TITLE		☐ DELEJE	5 1 TITLE		Change Addition
NAME SINGEL ADDRESS			5 2 NAME		
STREET ADDRESS CITY-ST-ZIP			5 3 STREET ADORESS		
TITLE		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6 4 CHY - ST - ZIP		
14. I do heretiy	certify that the information supplied	with this fring is voluntarily furnis	shed and does not qualify for	or the exemption stated in Section 119.0	7(3)(k), Florida Statutes, I further

I do hereby certly that the information supplied with this fing 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 address.

William A. Gehrand 04/11/96 813/572=7080

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF EIGHING-OFFICER OR DIRECTOR

SIGNATURE: