FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

-	IAL REPO 1997	ORT	Secretary of State DIVISION OF CORPORATIONS						Secretary of State						
DOCUN 1. Corporation	MENT	# F	- 91	964		(9)	- ·	····							
WM SH	erry re	ALTY,	INC.							ļ					
Principal Place of Business					Mailing Address							II OIQII EIQI	UPARI BIDII		
1925 SO CONGRESS AVE STE 250				1325 SO CONGRESS AVE STE 250							•				
BOYNTON BCH FL 33426 US			BOYNTON BCH FL 33426-5876 US						-	3. Date Incorporated or Qualifie	а Т	3a, Date	of Last B	enort 1	
03					•						07/26/1982		04/04/		BPVXII.
2. Principal Pa	ace of Busin	ess			1	Mailing Address					4. FEI Number 59-2227497			 	plied For Applicable
Suite, Apt 4	#, etc.	· · · · · · · · · · · · · · · · · · ·			26	Suite, Apt. #, etc.					5. Certificate of Status Desired	г	J .	 	Additional
22 City & State					27	City & State			······································	_				Fee Re	
23	,				28	City & State					Election Campaign Financing Trust Fund Contribution		J	\$5.00 Added t	, i
Zip	Country					Zip					8. This corporation has liability f				199.032,
24		25 and Ad	ldress o	1 Current	29 Regis	tered Agent	30				Florida Statutes 10. Name and Address of New		es i		
	RRY, WILLI							81	Name		· · · · · · · · · · · · · · · · · · ·	······		· · · · · · · · · · · · · · · · · · ·	
	SO CONG	RESS	AVE				ļ	82	Street A	ddres	s (P.O. Box Number is Not Accep	table)			*******
STE	25U 'NTON BCH	l Fil 3:	3426				<u> </u>	83							
501	111011001		,,,,,				-	B4	City					35 Zip (Code
				607.0500		107 4700 Flerida Oct			•						.
11. Pursuant t	o the provisi egistered ago	ons of t ent, or l	Sections both, in f	607 0502 he State c	and 6 f Florid	07.1508, Florida Statu da Such change was L. Paction 607 0505, 51	tes, the ab authorized	by	named of the corpo	oration	ation submits this statement for the a's board of directors. I hereby ac-	e purp cept ti	he appoin	anging it: iment as	registered
SIGNATURE	TE PER TIMICE PATE	it, erio	accept	ne obligat	ions o	r, 560.001 007.0505, F1	orida otalic	105.							
	Signature, typed	or printed		gistered agent ERS AND		.,	TE: Registered	Ager	nt signature t	equired	when reinstating) ADDITIONS/CHANGES TO OF		DATE SS AND DI	RECTOR	S IN 12
TITLE	DP				L/11 12.1	☐ DELETE	1.1 TITI	LE			ADDITIONO/OF WHALE TO OF	104.		Change	Addition
NAME	SHERRY, WILLIAM				1.			ME							
STREET ADORESS	581 N. COUNTRY CLUB DRIVE ATLANTIS FL								ADDRESS						1
CHY-ST-ZIF:	D	, , L				DELETE	1.4 CIT 2.1 TIT		- 299				L	Change	Addition
NAME	SHERRY,			_			2.2 NA	ME							
STREET ADDRESS	581 N. COUNTRY CLUB DRIVE ATLANTIS FL								ADDRESS						
CITY+ST-ZIP TITLE	NICHIK	, I L				☐ DELETE	2. 4 CIT		I - ZIP					Change	Addition
NAME							3.2 NA	ME							
STREET ADDRESS							3.3 STF	REET	ADDRESS						
CITY+S1-ZIP TITLE						DELETE	3.4. C/I 4.1 T/IT		T-ZIP					Change	Addition
NAME						Detter	4. 2 NA						L	Olarigo	
STREET ADDRESS									ADDRESS						
C-TY - ST - ZIP						DELEXE	4.4 CIT		- ZiP			<u></u>			1 delation
TITLE						☐ DELETE	5.1 111 6.2 MAI							Change	Addition
NAME STREET ADDRESS							5.2 NAI 5.3 STE		ADDRESS						
CITY - ST - ZIP							5.4 CIT		i i		·				
TIIL€						☐ DELETE	6.1 TiT							Change	Addition
NAME PEDECE ADDRESS							6.2 NA		ADDRESS						
STREET ADDRESS CITY-ST-ZIP							6.4 CIT		ADORESS - Zip		•				
	y cerlify that	I the inf	ormation	supplied	with th	his filing does not qual				ated in	n Section 119.07(3)(i), Florida Stat	ites	further ce	rtify 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.

FILED

Feb 25 1997 8:00am