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 # F9300003632 (7)

LIND - H	IARP, INC.				 	10 00 1000 100 1 000 100 100 100 100 100 100 100 100 10
Principal Page of Business Mailing Address Mailing Address						
P. O. BOX 188 BEMIDJI MN 56601		P. O. BOX 188 BEMIDJI MN 56619-0188				
					3. Date Incorporated or Qualified 08/09/1993	3a. Date of Last Report 04/12/1996
2. Prinopal Pi	acc of Business	2a. Mailing Address		··	4. FEI Number	Applied For
21		26		36-3858926 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Shate		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28]		Trust Fund Contribution	Added to Fees	
Zip Gountry		Zip Country		У	This corporation has liability for intangible tax under s. 199.032,	
24	25 9. Name and Address of Currer	29	30		Florida Statutes 10. Name and Address of New Re	J Yes □ No
OB44		ii negistered Agent	8-	Name C		gistered Agent
SIMALA, FLORIAN C III				1	Douglas S. Lindsey	
ORLANDO FL 32821				Chu	ress (P.O. Box Number is Not Acceptable) rch Street Market	
			8:	55	west-church s	rreet, Suite 240
			84	CityOr	·lando	FL S Zp Code
11. Pursuant t	to the provision, of Sections 607.050	02 and 607 1508, Florida Statu	utes, the abou	ve-named corpora	poration submits this statement for the p tion's board of directors. I hereby accep	
agent Far	or familiar will and ago. The oblig					in the appointment as registered
SIGNATURE	on process type one premisorance in require each age		Dov	iglass	S. Lindsey, Presidented when reinstalling)	At 3/11/97
12.	OFFICERS AN	· · · · · · · · · · · · · · · · · · ·	13.	Reut alfluature redor	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
THUE	PVS	☐ DEL€TE	1.1 TITLE			Change Addition
NAME:	LINDSEY, DOUGLAS		1.2 NAME			
STREET ADDRESS	5509 MALLARD LANE			I ADDRESS		
CHY-ST-ZIP TOLE	Bemidji mn	DELETE	1,4 CATY - 2.1 TULE			Change Addition
NAME		4 —1.	2.2 NAME			Land Strange
STREET ADDRESS			2.3 STREE	T ADDRESS		
Cd7+51_7#°				- ST - ZIP		
THE		[] DELETE	3.1 THILE			Change Addition
NAM: STREET ADDICASE			3.2 NAME			
CITY ST ZIP			3.4 CITY	T ADDRESS		
Title		DELETE	4.1 TITLE			Change Addition
NAME:	4.		4. 2 NAM	E		
STREET ADDRESS	4.3 \$		4.3 STREE	T ADDRESS		
CdY÷SL, ZP		4.4 CHY- S DELETE 5.1 THE				
TII(E NAV:			5.1 TITLE 5.2 NAME			Change Addition
STREET ADDRESS		I I		T ADDRESS		
Crity - ST - ZIP			5.5 S Mic			
TILE		DECETE	6.1 TITLE			Change Addition
NAMi			6.2 NAME			
STREET ADDRESS			6.3 STREE	1 ADDRESS		
011Y - \$1 - 749	ne real do this the independent serves be	d with this firms done not ave	6.4 CITY-	omntion state	d in Section 119.07(3)(i), Florida Statute	a I further partifu that the
information I am an of appears in	og callege and me internation supplier in indicated on this annual report of a flicer of director of the corporal in α in Block 12 or Block 13 if αhary d, α	o war one neing does not qua supplemental annual report is the Aceiver or trustee ompo r on an attachment with an a	true and acc vered to exe ideas.	curate and that cute this repo	d in Section 119.07(3)(j), Florida Statute it my signature shall have the same lega ort as required by Chapter 607, Florida S	s. Further certify that the I effect as if made under oath; that tatutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3/17/97

2187510238

FILED

Mar 25 1997 8:00am

Secretary of State