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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

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Jun 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000000758 (1)

HAROLD R. RUDOLPH ENTERPRISES, INC.

Principal Place of Business Mailing Address											
939 CHALMER MAROO ISLAN US		311 WORTHINGTON MARCO ISLAND FL 34145-5240 US									
	_						Date Incorpora 02/15/1995	ted or Qualified	3a. Date o 05/01/		eport
21	Place of Business	2a. Mailing Ac	idress			4.	FEI Number 38-281164	8			oplied For of Applicable
Suite, Apt.		Suite, Apt.	· · · · · · · · · · · · · · · · · · ·	<u> </u>		5.	Certificate of S	tatus Desired	\$		Additional equired
City & Stat		City & Stat	le				Election Campa Trust Fund Con	tribution		Added t	
Zip 94/	Country 25 9, Name and Address of Curi	Zip 29		Countr 30	у		Florida Statutes	n has liability for i	Yes N	0	. 199.032,
GAE	REFR-DAVID F	ent registered Agen	· · · · · · · · · · · · · · · · · · ·	., 81	Name 1				Bisteled Wilei	11	
1	2 E. TAMIAMI TRAIL		82	Street A	Hdraes (F	PROLO R. RUDOLPH					
1 ` '.'	TE-3047					t Address (P.O. Box Number is Not Acceptable)					
NAP	PLES-FL 83962	•		63							
<u>[</u>	<u>.</u>		· .	84			TSLAND.		FL B		Code
I office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta	de of Florida. Such ch	anne was au	ithorized h	iv the corno	orporatio oration's t	n submits this s board of director	latement for the p s. I hereby accep	urpose of cha of the appointr	nging it: nent as	s registered registered
	am familiar with, and accept the obl	igation of Section of	07.0505, Flor	ida Statute							
SIGNATURE	Signature, typed or printed name of registered	gent and title if applicable	(NOTE	Registered Ag	ent signature re	quited wher	reinstating)		DATE		
12.		ND DIRECTORS		13.			ADDITIONS/CHA	NGES TO OFFIC			
TITLE	PC RUDOLPH, HAROLD R		DELETE	1.1 TITLE					×	Change	Addition
NAME STREET ADDRESS	-314-WORTHINGTON			1.2 NAME	T ADDRESS	1010	Lenns	STREET	•		
CITY-ST-ZIP	MARCO ISLAND FL 88887-			1.4 CiTY-		54 ,		-) (66 67	3414	5	
TITLE			DELETE	2.1 TITLE	51-211					Change	Addition
NAME				2.2 NAME							
STREET ADDRESS				2.3 STREE	I ADDRESS						
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP			· -			
TITLE		Ц	DELETE	3.4 11TLE						Change	Addition
NAME				3.2 NAME							
STREET ADDRESS					T ADDRESS						
CITY-ST-ZIP			DELETE	3.4. CITY- 4.1 TITLE	S1-ZIP					Change	Addition
NAME		_		4. 2 NAME						on ange	
STREET ADDRESS					1 ADDRESS						
CITY-ST-ZIP				4.4 CITY-1	ST-ZIP						
TITLE			DELETE	51 TITLE						Change	Addition
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREE	I ADDRESS						
CITY-ST-ZIP				5.4 CITY-	ST-ZIP						
TITLE			DELETE	6.1 TITLE						Change	Addition
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREE	1 Address						
CITY-ST-ZIP				6.4 CITY - 9	ST-ZIP						

14. I do hereby certify that the information supplied with this filing does not qualify 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, or on an attachment with an address.