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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # G09255

CAHOON, INC.

FILED Mar 19 1997 8:00am Secretary of State



			 · · · · · · · · · · · · · · · · · ·					11811 F1311 1881
	e of Business	Mailing Address						
1235 CENTRAL PLACE LIDD SHORES % CHARLES D. CAHOON		1235 CENTER PLACE LIDD SHORES % CHARLES D. CAHOON						
SARASOTA FL		SARASOTA FL 34236	17					
US		US				3. Date Incorporated or Qualified 11/22/1982	3a. Date of La 04/15/199	*
2. Principal P	Place of Business	28. Mailing Address 26				4. FEI Number Applied For 59-2273405 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional
22		27				C. Gordionio di Stanto Estanto		e Required
City & Stat	e	City & State				6. Election Campaign Financing		.00 May Bo
Zip Country		Zip Country				Trust Fund Contribution	and the second second second	Ided to Fees
	25	Zip Taal	30	нигу		8. This corporation has liability for Florida Statutes	ntangible tax und Yes 🔲 No	der s. 199.032,
24	9. Name and Address of Current	29 Registered Agent	[30]	1		10. Name and Address of New Re		
CAH	OON, CHARLES DANNA			81	Nanie		~	
	CENTER PLACE				Ch	In the second P.O. Day Murahas in Not Account the		
	ASOTA FL 34236			82	Street Add	Street Address (P.O. Box Number is Not Acceptable)		
ONIV	1301A12 34230			83				
				L_				tan kilinin n
				84	City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Sta	atutes, the a	bovi	e-named cor	poration submits this statement for the p		ing its registered
office or i agent. I a	registered agent, or both, in the State on familiar with, and accept the obligations.	of Florida. Such change wa lions of, Section 607.0505,	as authorize Florida Sta	d by tutes	the corpora 3.	poration submits this statement for the pation's board of directors. I hereby acceptions	ot the appointme	nt as registered
SIGNATURE	Signature, typind or printed name of registered agen-	end the turner die	MATE Bookston	d And	et Consideration	महर्च क्ष ोलतार ग्रहालमञ्जू	DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	PD	☐ DELFTE	1.1 3	ILE			☐ Cha	ange
NAME	CAHOON, CHARLES DANA		1.2 N	AME				
STREET ADDRESS	1235 CENTER PL,LIDO SHRS	1.3 5		1.3 STREET ADDRESS				
CITY-ST-ZIP	SARASOTA FL		1.4 0	(IY-S	I-ZP			
TITLE	VD	☐ DELETE	211	IILE			Cha	ange 🔲 Addition
NAME	CAHOON, JOAN W.		22 N	AME				
STREET ADDRESS	1235 CENTER PL,LIDO SHRS		235	THEFT	ADDRESS			
CITY-ST-ZIP	SARASOTA FL		2 4 0	ny-:	S1 - 7/P			
TITLE	T	DELETE 31		TLE			☐ Cha	ange
NAME	CAHOON, DANA W.		32 N	AME				
STREET ADDRESS	1235 CENTER PL,LIDO SHRS		335	IREE1	ADDRESS			
CITY-ST-ZIP	SARASOTA FL		34.0	ШΥ- <u>:</u>	51 - Z IP			
TITLE		DELETE	4.1 1	ILE			∐ Cha	ange L Addition
NAME			4 2 1	IAME.				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP					I - 7/P			
TITLE		☐ DELETE	511				∐ Chá	ange [] Addition
NAME			52 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		T sellere			iI - 7iP		Π Λh.	ange Addition
TITLE		DETETE	61 T				Li Cha	ange [_] Addition
NAME			62 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	by certify that the information supplied	with this filing does as the		17 Y - \$		od in Section 119 07(3)(A) Florida Statuto	e 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 ooth. 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, Design Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address