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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Selection   Sele	cipal Place of Business  10 GRAY \$T MPA FL 33609  Principal Place of Business  Suite, Apt. #, etc.  City & State	Mailing Address FOWLER, WHITE ET AL PO BOX 1438 TAMPA FL 33602 US  2a. Malling Address 26 Suite, Apt. #, etc.			-05/01/ 3. Date incorporated or Qualified 11/22/1982	/9601052 10 00 ****2 3a. Date of Last Re	U13 <u>ÕÕ. O</u> Ū—
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11/22/1982	Principal Place of Business Suite, Apt. #, etc. City & State	2a. Malling Address 26 Suite, Apt #, etc.			11/22/1982	Jan Date of Last Re	JULI
Principal Place of Business  2. Mailing Address 2. Mailing Address 2. Mailing Address 2. Suite, Apt 4, etc.  3. Suite, Apt 4, etc.  4. Election Campaign Financing Trust Fund Contribution  4. Election Campaign Financing Trust Fund Campaign Financing	Suite, Apt. #, etc. City & State	2a. Malling Address 26 Suite, Apt. #, etc.				[ ] HI H AL . 100	,
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Country   Zip   So   So   So   So   So   So   So   S		h1			Trust Fund Contribution	Added	d to Fees
AND NAME and Address of Current Registered Agent  YON, DAVID 215 S MONROE ST., SUITE 400 215 S MONROE ST., SUITE 400 32 Street Address & F.O. Box Number is Not Acceptable)  83 Address & F.O. Box Number is Not Acceptable)  84 City  FL 85 Zop Code  85 Address & F.O. Box Number is Not Acceptable)  86 Address & F.O. Box Number is Not Acceptable)  87 Address & F.O. Box Number is Not Acceptable)  88 Address & F.O. Box Number is Not Acceptable)  89 Address & F.O. Box Number is Not Acceptable)  89 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  81 Address & F.O. Box Number is Not Acceptable)  82 Street Address & F.O. Box Number is Not Acceptable)  83 Address & F.O. Box Number is Not Acceptable)  84 City  FL 85 Zop Code  85 Zop Code  85 Zop Code  86 City  FL 85 Zop Code  87 Address & F.O. Box Number is Not Acceptable)  87 Address & F.O. Box Number is Not Acceptable)  88 Zop Code  89 Address & F.O. Box Number is Not Acceptable)  89 Address & F.O. Box Number is Not Acceptable)  89 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  80 Address & F.O. Box Number is Not Acceptable)  81 Address & F.O. Box Number is Not Acceptable)  81 Address & F.O. Box Number is Not Acceptable)  82 Address & F.O. Box Number is Not Acceptable)  82 Address & F.O. Box Number is Not Acceptable)  83 Street Address & F.O. Box Number is Not Acceptable)  84 Address & F.O. Box Number is Not Acceptable)  85 Address & F.O. Box Number is Not Acceptable)  85 Address & F.O. Box Number is Not Acceptable)  86 Address & F.O. Box Number is Not Acceptable)  87 Address & F.O. Box Number is Not Acceptable)  87 Address & F.O. Box Number is Not Acceptable)  88 Address & F.O. Box Number is Not Acceptable)  89 Address & F.O. Box Number i	Zip   Country		<u> </u>	¥		intangible tax under s	199.032,
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VON, DAVID 215 S MONROE ST., SUITE 400 TALLAHASSEE FL 32302    B4	<ol><li>Name and Address of Currer</li></ol>	nt Hegistered Agent	81	Name	1000		
215 S MONROE ST., SUITE 400 TALLAHASSEE FL 32302    Eat	YON DAMID				ess (P.O. Box Number is Not Acceptai	ible)	<u>,</u>
TALLAHASSEE FI. 32302    File   State   State							
I. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Exorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, it is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a committee with a corporation's board of directors. I hereby accept the appointment as registered agent. It is a corporation's board of directors. I hereby accept the appointment as registered agent. It is a corporation's board of directors. I hereby accept the appointment as registered agent. It is a corporation and accept the dependence of directors. I hereby accept the appointment as registered agent. It is a corporation's above and accept the corporation's above and accept the corporation's above and accept the appointment as registered agent. It is a corporation and accept the corporation's above and accept the corporation's above and accept the corporation's above and accept th			83	\$			2000
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4. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not quarter and that my signature shall have the same legal effect as if made 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 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 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 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 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 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 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 certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the same legal effect as if made certified in the s	4. I do hereby certify that the information supplies	ed with this filing is voluntarily fu	irnished and d	does not qualify	y for the exemption stated in Section in rate and that my signature shall have	THE.U7(3)(K), Florida Stathe same legal effect a	s if made unde

SIGNATURE: James R. Tucker President
SIGNATURE: James R. Tucker President
SIGNATURE: James R. Tucker President

(914) 692-3333

APPROVED AND

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