

FILED
May 14 1998 8:00am
Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/15/1983		
4. FEI Number 59-2279581	Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
10. Name and Address of New Registered Agent		
BRIGHT, KIRK E. (P.O. Box Number is Not Acceptable) DB 33RD AVE. W.		
PRADENTON	FL	85 Zip Code 334209

11. 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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ALBRIGHT, KIRK E. PTO Kirk E Albright 4.26.98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	PTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBRIGHT, KIRK E.	1.2 NAME	ALBRIGHT, KIRK E.
STREET ADDRESS	4111 19TH AVE. W.	1.3 STREET ADDRESS	4508 33RD AVE. W.
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBRIGHT, ASHLEY K.	2.2 NAME	ALBRIGHT, ASHLEY K.
STREET ADDRESS	4111 19TH AVE. WEST	2.3 STREET ADDRESS	3041 S.E. 18TH CT.
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	OKEECHOBEE, FL 34974
TITLE	VSD <input type="checkbox"/> DELETE	3.1 TITLE	VSD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBRIGHT, LINDA K	3.2 NAME	ALBRIGHT, LINDA K.
STREET ADDRESS	4111 19TH AVE. W.	3.3 STREET ADDRESS	4508 33RD AVE W.
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBRIGHT, AARON N	4.2 NAME	ALBRIGHT, AARON N.
STREET ADDRESS	411 19TH AVE W	4.3 STREET ADDRESS	4508 33RD AVE W.
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	BRADENTON, FL 34209
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: Augustine K. F. Koffi 4/26/1998 011-761-8654

CR2E034 (10/97)