FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G41286

(7)

Mailing Address

BROOKS, BRAXTON & HOLWAY, P.A.

FILED
Apr 09 1997 8:00am
Secretary of State



6404 MANATEE BRADENTON FL	AVE. WEST. SUITE L . 34209		6404 MANATEE AVE. WEST. SUITE L BRADENTON FL 34209-2353							
							3. Date Incorporated or Qualified 05/27/1983	3a. Date of Last Report 03/26/1996		
	tace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number			oplied For
21		26					59-2289398			ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	27				5. Certificate of Status Desired			Additional equired
City & State		City & State	<u> </u>				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Ζφ 29	Zip Cour 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
9. Name and Address of Current Registered Agent							0. Name and Address of New Re	gistered	Agent	
Braxton, Benjamin D.					Nam	е				
6404 MANATEE AVE. WEST, SUITE L BRADENTON FL 34209					Stree	t Address	(P.O. Box Number is Not Acceptab	ole)		
Dist	DENTON / C O1500			83						
				84	City	······································		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Florida Statu	tes, the a	bove	-name	d corpora	tion submits this statement for the p	ournose of	changing i	ts registered
office or n agent I a	egistered agent, or both, in the t mitamiliar with, and accept the c	State of Florida. Such change was obligations of, Section 607.0505, Fi	authorize lorida Sta	id by tutes	the co	rporation'	s board of directors. I hereby accep	ot the app	ointment as	registered
SIGNATURE	,									
3131471311	Signature, typed or printed name of majoten			d Age	nt signat	w berlupar ar	hen reinstating)	DATE		
12.	OFFICERS	S AND DIRECTORS	13.			··•	ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITE (POOLOGE CHECTED D	DELETE	1.1 7						∐ Change	☐ Addition
N4Mf	BROOKS, CHESTER R. 655 6404 MANATEE AVE.WEST,#L			1.2 NAME						
STREET ADDRESS	BRADENTON FL			1.3 STREET ADDRESS						
CITY - ST - ZIP TITLE	VS DELETE			1.4 CITY-ST-ZIP 2.1 TITLE				,, , ,,	Change	Addition
NAME	HOLWAY, FLOYD J.			2.2 NAME					Limit Gridings	
STREET ADORESS	6404 MANATEE AVE.WEST	ī. # L	2.3 STREET ADDRESS			,				
City-ST-7IP	BRADENTON FL	•" =		2. 4 CITY - ST - ZIP						
THILE	T DELETE			3.1 TITLE					Change	Addition
NAME	BRAXTON, BENJAMIN D			3.2 NAME						
STREET ADORESS	6404 MANATEE AVE.WEST	Γ _i #L	3.3 \$	TREET	ADDRES	3				
C(1) Y - S1 - 21P	BRADENTON FL		3.4. (CITY-S	ST- 21P					
TITLE		☐ DELETE	4.1 T	ITLE					☐ Change	Addition
NAME			4.26	MAME						
STREET ADDRESS			4.3 S	TREET	ADDRES	3				
CITY - S1 - ZIP				ITY-S	T-ZIP				T	1114388
701.6		() DELETE	5.1 7						Change	Addition
NAME			5.2 N							
STREET ADORESS					ADDRES	·				
COY-ST ZIP		DELETE	5.4 C 6.1 T	ITY-S	1-21P				Change	Addition
TITLE		FT DECEME					•		L., Unange	L AUUIIIUII
NAME SUBSCLADSDUCC			6.2 N		ADDOLO	,				
STREET ADORESS					ADDRES:	`				
City-St-ZIP		The state of the s	b.4 C	ITY-S		ntota di la	Continue 110 07(2)(i) Florido Ctatuto	- 14	r nortify that	Ab a

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 the ged, or on an attachment with an address.

Date

SIGNATURE: