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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G75269

(2)

BARSUT CORPORATION

| Principal | Place | of | Business |
|-----------|-------|----|----------|

Mailing Address

1111 SWANN AVENUE TAMPA FL 33606 1111 SWANN AVENUE TAMPA FL 33606-2637

FILED Feb 03 1997 8:00am Secretary of State



| Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State City & State City & State City & State Country Country Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees This corporation has liability for intangible tax under s. 199.032, | IMMEN EL SON | • | THAT I I L GOOGG TOO! | | \ | | | | |
|--|---|--|-----------------------------------|---------------------------------------|--|------------------------------------|--|--|--|
| 22 | | | | | | | | | |
| Solfo, Apt #, ricc Surface Apt #, ricc S | 2. Principal Pla | ace of Business | 2a. Mailing Address | · · · · · · · · · · · · · · · · · · · | | | | | |
| City & Status City & | 21 | | 26 | | 59-2354552 | Not Applicable | | | |
| 22 27 28 28 29 28 29 29 20 | Suite, Apt | #, etc | Suite, Apt. #, etc. | | F. Cariffeets of Care a Decimal | S8.75 Additional | | | |
| 28 Toust Fund Contribution Added to Feese Added t | 22 | | 27 | | Certificate of Status Desired | Fee Required | | | |
| 28 | City & State |) | City & State | | 6. Election Campaign Financing | \$5.00 May Be | | | |
| 9. Name and Address of Current Registered Agent MONEY, MARK PA. | 23 | | 28 | _ | Trust Fund Contribution | | | | |
| 9. Name and Address of Current Registered Agent MOONEY, MARK P.A. BAY-BAYE CENTER 13887 N. Date MABRY HAY TAMPA FL 38818 3 3 6/2 - 3363 12 11 U. Fletcher Auce 82 Street Address (P.O. Box Number is Not Acceptable) 83 21 11 U. Fletcher Aucents 84 City Tumpa FL 85 3 6/2 - 2 11. Pursuant to the provisions of Sections 607,0502 and 607.1508, Florida Statutes. The above-named corporation is board of directors. I hereby accept the depointment as registered agent. I am half and the appointment as regi | Zip | Country | Zφ | Country | 8. This corporation has liability for it | intangible tax under s. 199.032, | | | |
| MOONEY, MARK PA. SAY-BAXE-CENTER 138071 - DATE MARRY HAY TAMPA FL 36818 3 3 6/2 - 33 6.3 11. Pursuant to the provisions of Socitions 807,0502 and 607,1508, Fiorida Statutes. The abundance of the provisions of Socitions 807,0502 and 607,1508, Fiorida Statutes. The abundance of the sponsor of the appointment as registered differe or repistered 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 director or repistered 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 directors or repistered accept two obligations of the sponsor of the appointment as registered directors. I hereby accept the appointment as registered. I am a factor of the appointment as registered accept the appointment as registered. I am a factor of the appointment as register | 24 | | | | | | | | |
| TAMPA FI. Social Statutes. The Street Address Fig. Co. Box Number is Not Acceptable) 13. Pursuant to the provisions of Sociales 607.0502 and 607.1508. Fiorida Statutes, the above-named corportion submits this statement for the purpose of changing list registered agent. I am familiar with an advance put the oligipations of, Section 607.0505, Provide Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE P SUTTON, MARTHA W. 418 CARROLLWOOD VILLAGE 12. INTEL 12. INTEL 13. SITTON, MARTHA W. 418 CARROLLWOOD VILLAGE 13. SITTON, KATHYN E 418 CARROLLWOOD VILLAGE 14. TAMPA FI. DELETE 21. TITLE ST DELETE 21. TITLE ST DELETE 31. TITLE Change Addition Addition MAKE 33. SIRRET ADDRESS Chr. 51. 7P TAMPA FI. DELETE 31. TITLE Change Addition Addition Addition Addition SIRRET ADDRESS STANKE ADDRESS STREET ADDRESS STANKE ADDRESS STREET A | | 9. Name and Address of Current | Registered Agent | | 10, Name and Address of New Re | gistered Agent | | | |
| TAMPA FL 30018 3 3 6/2 - 3363 1. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorical Statutes. The above-named corporations automite this statement for the purpose of changing its registered agreet. Term familiar with and accept the obligations of, Section 607 0505, Fiorical Statutes. 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorical Statutes. The above-named corporations automite this statement for the purpose of changing its registered agreet. Term familiar with and accept the obligations of, Section 607 0505, Fiorical Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. Carry 51-729 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. STITULE 12. INITE 17. STITULE 12. INITE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. SUTTON, MARTHA W. 12. AMA 12. AMA 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. Carry 51-729 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. SUTTON, MARTHA W. 12. AMA 13. SIRRET ADDRESS 14. Carry 51-729 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 16. Change Addition 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Change Addition 10. Change Addition 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TO OFF | MOC | ONEY, MARK P.A. | | | MOONEY MARK | PA | | | |
| 13867 N. TALE MARRY HAV TAMPA FI. 38618 3 3 6/2 - 33 6 3 14 City Tunna FL SS JP Code FL SS JP | | WAKE CENTER 12 | 11 W Fletcher A | De B2 Street Ad | | ole) | | | |
| 11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corpodition submits this statement for the purpose of sharping fit 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 Signature figures and pressure of pressure and respective agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SUTTON, MARTHA W. 418 CARROLLWOOD VILLAGE 1.3 TITLE SUTTON, KATHRYN E 418 CARROLLWOOD VILLAGE 1.4 TITLE SUTTON, KATHRYN E 418 CARROLLWOOD VILLAGE 1.5 TITLE SUTTON, KATHRYN E 418 CARROLLWOOD VILLAGE 1.5 TITLE SUTTON, KATHRYN E 418 CARROLLWOOD VILLAGE 1.5 TITLE SUTTON, SECTION SEC | 1396 | | • • | | | | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hanned corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florida Studies, above corporation's board of directors. I hereby accept the appointment as registered agent. Term familiar with, and except the obligations of Section 607.0505, Florida Statutes, the above-hanned corporation's board of directors. I hereby accept the appointment as registered agent. Term familiar with, and except the obligations of Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE SUTTON, MARTHA W. 418 CARROLLWOOD VILLAGE 1.3 SIRER ADDRESS CITY-S1-72P TAMPA FL OFFICERS AND DIRECTORS 2. TITLE 1.2 SITEM DELETE 1.3 TITLE SUTTON, KATHRYN E 4418CARROLLWOOD VILAGE 1.3 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE Change Addition AMA 3.2 PAME 4.4 SITEM ADDRESS CITY-S1-72P TAMPA FL OFFICERS AND DIRECTORS IN 12. TITLE Change Addition AMA 3.3 SIRER ADDRESS CITY-S1-72P THE DELETE 4.1 TITLE Change Addition AMA 3.3 SIRER ADDRESS CITY-S1-72P THE DELETE 3.1 TITLE Change Addition AMA 3.3 SIRER ADDRESS CITY-S1-72P THE DELETE 4.1 TITLE Change Addition AMA 3.3 SIRER ADDRESS CITY-S1-72P Change Addition ADDRESS CITY-S1-72P Change ADDRESS CITY-S1-72P Change ADDRESS CITY-S1-72P Change ADDRESS CITY-S1-72P Change ADDRESS CITY-S1 | TAM | PA FL 30018 336/2-3. | 363 | 83 /2 | 11 11 Elatalas A | 110mile | | | |
| 11. Pursuent to the purvaients of Sections 607 0502 and 607 1508. Provide Statutes. The above-named corpodition submits this statement for the purpose of changing lits registered agent. I am familiar wild, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFTICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. PURPORT OF A STATE OF | | 200,, | | | II W FIETCHET PI | | | | |
| 11. Pursuent to the purvaients of Sections 607 0502 and 607 1508. Provide Statutes. The above-named corpodition submits this statement for the purpose of changing lits registered agent. I am familiar wild, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFTICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. PURPORT OF A STATE OF | | | | O4 City TA | mna | FL 85 3 36/2 | | | |
| SIGNATURE | 11. Pursuant t | o the provisions of Sections 607.0502 | and 607.1508, Florida Statutes, | the above-named co | proporation submits this statement for the p | purpose of changing its registered | | | |
| 12 | 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. | | | | | | | | |
| TITLE | SIGNATURE | | | egistered Agent signature rec | | | | | |
| NAME STREET ADDRESS CITY-ST-7P TAMPA FL ST ST DELETE 21 TITLE ST | 12. | | | | ADDITIONS/CHANGES TO OFFIC | | | | |
| STREET ADDRESS TAMPA FL | TITLE | • | L_J DELETE | 1.1 TITLE | | Change Addition | | | |
| TAMPA FL | NAME | | | 1.2 NAME | | | | | |
| TITLE | STREET ADDRESS | | | 1.3 STREET ADDRESS | | Į. | | | |
| NAME SUTTON, KATHRYN E 22 NAME 23 STREET ADDRESS 24 CITY - ST - 2IP | CITY-ST-ZIP | | | 1,4 CITY-ST-ZIP | | | | | |
| Addition Change Addition | TITLE | ST | DELETE | 2.1 TITLE | | Change Addition | | | |
| City - St - ZiP | NAME | SUTTON, KATHRYN E | | 2.2 NAME | | | | | |
| DELETE | STREET ADDRESS | 4418CARROLLWOOD VLG DR | | 2.3 STREET ADDRESS | | | | | |
| NAME | DiTY-ST-ZIP | TAMPA FL | | 2. 4 CHTY - ST - ZIP | | | | | |
| STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP | TITLE | | DELETE | 3.1 TITLE | | Change Addition | | | |
| CITY-ST-ZIP | NAME | | | 3.2 NAME | | , | | | |
| CITY-ST-ZIP | STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | | |
| DELETE | | | | 3.4. CITY+ST-ZIP | | | | | |
| Addition | | | DELETE | | | Change Addition | | | |
| A 3 STREET ADDRESS A 4 CITY-ST-ZIP A 4 CITY-ST-ZIP | NAME | | | 4.2 NAME | | | | | |
| A 4 CITY - ST - ZIP | ł | | | 43 STREET ADDRESS | | | | | |
| TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME | | | | 4.4 CITY-ST-ZIP | | · | | | |
| NAME | | | DELETE | | | Change Addition | | | |
| STREET ADDRESS | ŀ | | | 5.2 NAME | | - | | | |
| | * * | | : | | | | | | |
| 1TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP | | | | | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | | | □ DELETE | | | Change Addition | | | |
| STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | 1 | | <u> </u> | | | | | | |
| CITY-SI-ZIP 6.4 CITY-SI-ZIP | | | | | | | | | |
| | | | | | | | | | |
| | | ou certify that the information supplied | with this filing does not qualify | | ted in Section 119 07/3Vi). Florida Statuta | es. I further certify that the | | | |

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.

SIGNATURE: MARTHA W. Satton Matheway

1/29/97 (813) 254-31/2