## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

ESTAR JULEN

SIGNATURE:

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

**DOCUMENT # G79591** 

(5)

### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### SOURCEST ST N. PINELLAS PARK FL 34666 US  ### Sourcest St P. Sourcest Adoless St P. Sourcest St P. Sourcest Adoless St.	881101 BEN 18800 1818J BUN 1818		
2. Principal Place of Business   28. Mailing Address   4. FEIN   21. Suito, Apt #, etc.   Suito, Apt #, etc.   Suito, Apt #, etc.   22. City & State   City & State   City & State   23. Zip   Country   Zip   Country   Zip   Country   24. Per   Zip   Country   Zip   Country   Zip   Country   25. Zip   Country   Zip   Country   Zip   Country   26. Street Address of Current Registered Agent   Si Name   27. Name and Address of Current Registered Agent   Si Name   28. Street Address (P.O. Box   30. ST PETERSBURG FL 33701   Si Name   31. Name   Si Name   Si Name   Si Name   32. Street Address (P.O. Box   33. Street Address (P.O. Box   34. City   Si Name	001/(   06/1° 1901/9 18/18/ 6/1/A	it tibt didii didii disk dibii di	BII GIVII IFTI
26   Suite, Apt. #, etc.   Suite, Apt. #,	ncorporated or Qualified /30/1983	3a. Date of Last Rep 04/25/1995	
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.		<b>⊢</b>	oplied For
City & State  Ci	6-2248023		ot Applicable
City & State    28	cate of Status Desired	(1) \$8.75 A	
Zip Country Zip Country 2 Zip Country 8. This c Product	on Campaign Financing	\$5.00	<del></del>
PATEUR SAME AND DIRECTORS  SIREEL ADDRESS  STREET ADDRESS  STR	Fund Contribution	Ci Added t	•
## STREET ADDRESS ONE BEACH DR #2511 STREET ADDRESS ONE STREET	orporation has liability for		99.032,
FISHER & SAULS, P.A.  100 2ND AVE STE. 701, CITY CTR. BLDG. ST PETERSBURG FL 33701  83  84 City  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature synet or preto amen of registered agent and bits it applicable.  PO		[] No	
FISHER & SAULS, P.A. 100 2ND AVE STE. 701, CITY CTR. BLDG. ST PETERSBURG FL 33701  11. Pursuant to the provisions o' Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature: Pyted or profice mane or registered agent and tribil acquatate.  PD  OFFICERS AND DIRECTORS  13. ADDIT  11ILE  PD  ORE BEACH DR #2511  13. STREET ADDRESS  ONE BEACH DR #2511  NAME  SWANSON, JOSEPHINE  ONE BEACH DR #2511  NAME  SWANSON, JOSEPHINE  ONE BEACH DR #2511  23. STREET ADDRESS  ONE BEACH DR #2511  124. CITY-SI-ZIP  TITLE  ST  ORE BEACH DR #2511  123. STREET ADDRESS  ONE BEACH DR #2511  13. STREET ADDRESS  ONE BEACH DR #2511  14. CITY-SI-ZIP  TITLE  ST  DELETE  3 1 TITLE  ST  DELETE  3 2 NAME  LAWTON, GEORGE  STREET ADDRESS  9000-68TH ST., N.  33. STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  SIREET ADDRESS  GITY-SI-ZIP  DELETE  A4. TITLE  NAME  SIREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  A4. TITLE  NAME  43. STREET ADDRESS  CITY-SI-ZIP  TITLE  DELETE  5. 1 TITLE  TITLE  DELETE  5. 1 TITLE  TITLE  TITLE  DELETE  5. 1 TITLE  TITLE  TITLE  TITLE  DELETE  5. 1 TITLE	and Address of New R	legistered Agent	. <u> </u>
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature typed or printed name of registered agent and bib if applicable.   MOTE: Registered Agent signature requires with the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   Signature typed or printed name of registered agent and bib if applicable.   MOTE: Registered Agent signature requires when renabling.    12.			
ST PETERSBURG FL 33701  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature   Special of printed name of registered agent and bits if applicable   NOTE: Registered Agent signature req. set when renatating	Number is Not Acceptab	ole)	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Stgribble typed or profit of name of registered agent and tible if applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the profit in applicable.   INOTE: Registered Agent signature requision of the p			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature: typed or printed name of registered agent and tibilit applicable. PNOTE: Registered Agent signature req., or when renatating?  12. OFFICERS AND DIRECTORS  13. ADDIT  ITILE  PD  DELETE  1.1 ITILE  NAME  SWANSON, JAMES H.  12 NAME  SIRRET ADDRESS  CITY - ST-2IP  ST PETERSBURG FL  1.4 CITY - ST-2IP  ITILE  NAME  SWANSON, JOSEPHINE  ONE BEACH DR #2511  22 STREET ADDRESS  CITY - ST-2IP  ST PETERSBURG FL  1.4 CITY - ST-2IP  TITLE  ST  DELETE  3 1 TITLE  NAME  LAWTON, GEORGE  32 NAME  STREET ADDRESS  CITY - ST-2IP  TITLE  DELETE  4.1 TITLE  ALCITY - ST-2IP  TITLE  DELETE  4.1 TITLE  ALCITY - ST-2IP  TITLE  ALCITY - ST-2IP  TITLE  DELETE  4.1 TITLE  ALCITY - ST-2IP  TITLE  ALCITY - ST-2IP  TITLE  DELETE  5.1 TITLE			
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature: speed or printed name of registered agent and title if applicable.  PD  OFFICERS AND DIRECTORS  13. ADDIT  11ILE  PD  SWANSON, JAMES H.  12 NAME  SIREET ADDRESS  ONE BEACH DR #2511  1.1 TITLE  D  ITILE  D  DELETE  1.4 CITY-ST-ZIP  TITLE  ST PETERSBURG FL  1.1 TITLE  DAME  SWANSON, JOSEPHINE  22 NAME  SIREET ADDRESS  ONE BEACH DR #2511  23 STREET ADDRESS  C-TY-ST-ZIP  ST PETERSBURG FL  DELETE  31 TITLE  NAME  LAWTON, GEORGE  32 NAME  STREET ADDRESS  CITY-ST-ZIP  ST. PETERSBURG FL  DELETE  31 TITLE  NAME  LAWTON, GEORGE  32 NAME  STREET ADDRESS  CITY-ST-ZIP  ST. PETERSBURG FL  DELETE  4. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  4. TITLE  NAME  42 NAME  43 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  5. TITLE  NAME  43 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  5. TITLE  DELETE  5. TITLE  DELETE  5. TITLE  DELETE  5. TITLE  TITLE  TITLE  DELETE  5. TITLE  TITLE  TITLE  TITLE  DELETE  5. TITLE  TITLE  TITLE  TITLE  TITLE  DELETE  5. TITLE  T		FL 85 Zip (	Code
Signature : typed or printed name of registered agent and bits if applicable:   NOTE: Registered Agent signature req. or when renatating	this statement for the pur I hereby accept the appoint	rpose of changing its reg ointment as registered a	jistered office gent. I am
12.			
TITLE PD □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	IONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS	S IN 12
SIREET ADDRESS ONE BEACH DR #2511  CITY-ST-ZIP  TITLE  D  DELETE  SWANSON, JOSEPHINE SIREET ADDRESS ONE BEACH DR #2511  CTY-ST-ZIP  ST PETERSBURG FL  22 NAME  23 STREET ADDRESS CTY-ST-ZIP  ST PETERSBURG FL  32 CITY-ST-ZIP  TITLE  NAME LAWTON, GEORGE SIREET ADDRESS OO-68TH ST., N.  ST. PETERSBURG FL  33 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  DELETE  4.1 TITLE  NAME  42 NAME  42 NAME  42 NAME  42 NAME  43 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  DELETE  5.1 TITLE			Addition
CITY-SI-ZIP         ST PETERSBURG FL         1.4 CITY-SI-ZIP           TITLE         D         □ DELETE         2.1 TITLE           NAME         SWANSON, JOSEPHINE         22 NAME           STREET ADDRESS         ONE BEACH DR #2511         23 STREET ADDRESS           C-TY-SI-ZIP         ST PETERSBURG FL         24 CITY-SI-ZIP           TITLE         ST         □ DELETE         3.1 TITLE           NAME         LAWTON, GEORGE         32 NAME           STREET ADDRESS         9000-68TH ST., N.         33 STREET ADDRESS           CITY-SI-ZIP         34 CITY-SI-ZIP           TITLE         □ DELETE         4.1 TITLE           NAME         42 NAME           STREET ADDRESS         44 CITY-SI-ZIP           TITLE         □ DELETE         5.1 TITLE			
DELETE   D			
NAME SWANSON, JOSEPHINE STREET ADDRESS ONE BEACH DR #2511 23 STREET ADDRESS C-TY-ST-ZIP ST PETERSBURG FL 24 CITY-ST-ZIP TITLE ST DELETE 3.1 TITLE NAME LAWTON, GEORGE 32 NAME 33 STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE			
STREET ADDRESS	<del></del>	☐ Change	Addition
C-TY-ST-ZIP   ST PETERSBURG FL   24 CITY-ST-ZIP     TITLE   ST			
TITLE			
NAME			
STREET ADDRESS   9000-68TH ST., N.   33 STREET ADDRESS   ST. PETERSBURG FL   34 CITY-S1-ZIP   TITLE   DELETE   4.1 TITLE		☐ Change	☐ Addition
CITY-ST-ZIP         ST. PETERSBURG FL         3.4 CITY-ST-ZIP           TITLE         DELETE         4.1 TITLE           NAME         42 NAME           STHEET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE			
TITLE         DELETE         4.1 TITLE           NAME         42 NAME           STHEET ADDRESS         4.3 STREET ADDRESS           City-St-ZiP         4.4 CITy-St-ZiP           TITLE         DELETE         5.1 TITLE			
NAME         42 NAME           STHEET ADDRESS         4.3 STREET ADDRESS           City-St-ZiP         4.4 City-St-ZiP           TITLE         □ DELETE         5.1 TITLE		Change	Addition
STHEET ADDRESS			
City-St-ZiP         4.4 city-St-ZiP           Title         Delete         5.1 title			•
TITLE DELETE 5.1 TITLE			
The same		☐ Change	Addition
NAME 5.2 NAME			
STHEET ADDRESS 5.3 STREET ADDRESS			
CITY-ST-ZIP 54 CITY-ST-ZIP			
TITLE DELETE 6 1 TITLE		Change	☐ Addition
NAME , 62 NAME			
STREET ADDRESS . 6.3 STREET ADDRESS			
CITY-ST-ZIP 6.4 CITY-ST-ZIP		TEMPORE For John Ohne Ann	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exempt certify that the information indicated on this annual report or supplemental annual report is true and accurate and that m oath; that I am an officer or director of the corporation of the relevant review of the properties in Block 12 or Block 13 if changed, or on an attachment the properties.	Control to Control 140	.07(3)(k). Florida Statutes	nade under

2/13/96 813/541-3575