FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 L452

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G86487

(7)

CORAL SQUARE FOOTACTION, INC.

Mailing Address

FILED

Feb 27 1997 8:00am

Secretary of State

67 MILLBROOK ST. WORCESTER MA 01806		67 MILLBROOK ST. WORCESTER MA 01606-2817					
					3. Date Incorporated or Qualified 02/27/1984	3a. Date of 05/01/1	f Last Report 1996
2. Principal P	2a. Mailing Address	dress		4. FEI Number		Applied For	
21 CORP	¥L SQUARE	26 1980 BENT	BRA	DOH DE	2. 04-2837959		Not Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 Additional Fee Required
City & State	LSPRINGS, FL	City & State 28 TRYING, TX	>		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
^{Zip} 24 З3 ⊙́	Criuntry*	Zip 29 75063	Country	5 -	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Current I	Registered Agent			10. Name and Address of New Re	gistered Ager	nt
LINIT	TED STATES CORPORATION COM	PANY	81	Name			
1201 HAYS STREET SUITE 105				82 Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301			83				
			84	City			5 Zip Code
			04	City		FL 8	3) Zip Code
11. Pursuant office or reagent. La	to the provisions of Sections 607.0502 i egistered agent, or both, in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statute f Florida. Such change was au ons of, Section 607.0505, Flor	s, the above uthorized by ida Statute	e-named corp the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of cha at the appointr	inging its registered nent as registered
SIGNATURE	Signature typed or printed hame of registered agent.	and the deput cold	Danistered 4a	at along the south	ed when reinstating)	DATE	
12.	Z OFFICERS AND		13.	on argulata o require	ADDITIONS/CHANGES TO OFFIC		RECTORS IN 12
MILE	D OF RECTIONAL	DELETE	1,1 TITLE	Ø	16		Change Addition
NAME	MCVEY, KARRY A		1.2 NAME	0	ALPH T. PARKS		- · ·
STREET ADDRESS	67 NULLBROOK ST.			ADDRESS T	BO BENT BRANG	SH PR	, #100
CITY - ST - ZIP	WORCESTER MA 01606		1.4 CITY - S	1.7IP	EVING TX 75063	.	
1011F	V	DELETE	2.1 TITLE		10 1300 1	<u>'</u>	Change Addition
NAME:	WOZNIAK, EDWARD S		22 NAME		HARUES M. AUBE	BT T	, ,
STREET ADDRESS	67 MILL BROOK ST.		2.3 STREET	Annress OF	BO BENT BRANGH	. DR .1	¥100
CITY ST ZIF	WORCESTER MA 01606		2 4 CiTY-	ST-7P	VING, TX 75063	φ	
TITLE	v /	DELETE	31 TITLE	-40	ATTACK T TACKED		Change 🔀 Addition
NAMÉ	ANDERSON, THEODORE L	• •	32 NAME	ملا	omer L. Greer		•
STREET ADDRESS	67 MILLBROOK ST.		3 3 STREET	ADDRESS -	180 BENT BRANGI	1 100.4	kino l
CITY-ST-ZIF	WORCESTER MA 01606		3.4. CITY-		VING, TY 75063	1 14 163	100
TITLE	AS	DELETE	4.1 TITLE	S	4.114.4.1.4.1.9.4.0.		Change Addition
NAME	DARENCE, ROGER	-	4. 2 NAME	m	ark w. mayer		
STREET ADDRESS	67 MINLBROOK ST.		4 3 STREET	ADDRESS 78	780 BENT BRANCH	P & #	4100
City-St-7iP	WORCESTER MA		4.4 CiTY- 8		eving TX 75063		
TITLE		☐ DELETE	5 1 TITLE				Change Addition
NAME			52 NAME				
STREET AUDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIE			5.4 CiTY-S	t			
THLE		DELETE	6 1 TITLE				Change Addition
NAMI			62 NAME				
Process Appropries				**********			

14. 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 or changed, information and address.

SIGNATURE: