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

PROFIT CORPORATION ANNUAL REPORT



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

1996

** EDMUND J. ANDERSON 2519 WATKINS DR MELBOURNE FL 32901  **S19 WATKINS DR MELBOURNE FL 32901  **Suite, Apt. #, etc.		MENT # <b>H224</b>	48 (5)					
Moving Address   Movi	•		RNE, INC.					
Moving Address   Movi								
2519 WATKINS OR   MELBOURNE F1 32901	Principal Place of Business Mailing Address						THE BIRTH MINNI MINNI DIGIT INDE	
Pricipal Piece of Business   2s. Mailing Address   4. FET Number   59-2463392	2519 WATKINS DR		2519 WATKINS DR		Date Incorporated or Qualified	of Last Report		
Sulfa, Art. 4, etc.								
Pee Required   Pee   P	<del></del>		<u> </u>	7				
City & State			F	<u> </u>		5. Certificate of Status Desired		
Zep Country 761 Sold Country 191 Sold Co	City & State			my .				
9, Name and Address of Current Registered Agent  ANDERSON, EDMUND J. 2519 WATKINS DR  MELBOURNE FL 32901  40 City  FL 85 Zip Code  41 City  FL 85 Zip Code  42 City  FL 85 Zip Code  43 City  FL 85 Zip Code  44 City  FL 85 Zip Code  45 City  FL 85 Zip Code  46 City  FL 85 Zip Code  47 City  FL 85 Zip Code  48 City  FL 85 Zip Code  49 Tip Code  40 Tip Code  4	Zip	Country Zip Cou		H	ry	8. This corporation has liability for intangible tax under s. 199.032,		
ANDERSON, EDMUND J. 2519 WATKINS DR MELBOURNE FL 32901  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Fordal Statutes, this allows named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, this allows named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, this allows named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, this allows named or corporation submits this statement for the purpose of changing its registered office or registered agent. I am State of Florida Statutes, this allows named or registered agent. I am State of Florida Statutes, this allows named or registered agent. I am State of Florida Statutes, this allows named or registered agent. I am State of Florida Statutes, this allows named or registered agent. I am State of Florida Statutes, this allows named or registered office or registered agent. I am State of Florida Statutes, this allows named or registered office or registered agent. I am State of Florida Statutes, this allows named or registered office or registered agent. I am State or registered office or registere								
2519 WATKINS DR MELBOURNE FL 32901  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0510 and 677.1508. Foods Statutes the above named corporation submits this statement for the purpose of Delanging its registered office carriegistered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby ancept the appointment as negistered agent, and accept the obligations of, School Statutes.  SIGNATURE  Signature  12. OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  INCE  ANDERSON, EDMUND J.  2519 WATKINS DR  12 SIREL ADDRESS  ANDERSON, EDMUND J.  2519 WATKINS DR  13 SIREL ADDRESS  MELBOURNE FL  14 CITY ST. 2P  MELBOURNE FL  14 CITY ST. 2P  MELBOURNE FL  15 TILE  17 TILE  18 CITY ST. 2P  MELBOURNE FL  19 Change  Addition  ANDERSON, SANDRA S.  21 SIREL ADDRESS  CITY ST. 2P  MELBOURNE FL  19 Change  Addition  ANDERSON SANDRA S.  21 SIREL ADDRESS  CITY ST. 2P  TILE  10 DELETE  3 TILE  3 TILE  10 DELETE  3 TILE  10 Change  Addition  ANDERSON SANDRA S.  3 SIREL ADDRESS  CITY ST. 2P  TILE  10 Change  Addition  ANDERSON SANDRA S.  3 SIREL ADDRESS  CITY ST. 2P  TILE  10 Change  Addition  ANDERSON SANDRA S.  3 SIREL ADDRESS  CITY ST. 2P  TILE  10 Change  Addition  ADDRESS STREET ADDRESS  CITY ST. 2P  TILE  10 Change  Addition  ADDRESS STREET ADDRESS  CITY ST. 2P  TILE  10 Change  Addition  ADDRESS STREET ADDRESS  CITY ST. 2P  Change  Addition  ADDRESS STREET ADDRESS  CITY ST. 2P  TILE  10 Change  Addition  ADDRESS STREET ADDRESS  CITY ST. 2P  Change  Addition  Change  Addition  ADDRESS STREET ADDRESS  CITY ST. 2P  Change  Addition  Change  Change  Change  Change  Change  Change  Ch		g, Hallie alle Abbress et balle	it noglotorou rigoni	8	1 Name	10.		
MELBOURNE FL 32801	ANDERSON, EDMUND J.			8	2 Street Addu	Idraes (P.O. Box Number is Not Acceptable)		
### City	2519 WATKINS DR			Ĺ				
1.   Pursuant to the provisions of Sections 607 0502 and 607.1508, Fiorida Statutes, two above named corporations abouts this statement for the purpose of changing ats registered discered register. Or both, in this State of Florida Such changing was enthorroad 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 607.0565 Florida Statutes.    Signature	MELBOURNE FL 32901			8	3			
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 code obligations of post and blef agents. I am familiar with code obligations of post and blef agents. I am familiar with code of post an				8	4 City	FL 85 Zip Code		
SIRRATURE	11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above	named corpor	ration submits this statement for the purpose of char rd of directors. Thereby accept the appointment as i	nging its registered office	
Signature person prince change on large of land after the accountable   Signature person after contenting   CATE	familiar wit	th, and accept the obligations of, Sect	ion 607.0505. Florida Statutes		portation of occ	to or	25	
12.	SIGNATURE _	Starature, typed or printed name of reasoned about	such the if appropriate (NC)	III - Haustered Ad	end Somature residue	or when renstating DATE		
NAME   ANDERSON, EDMUND J.   2519 WATKINS DR   13 STREET ADDRESS   MELBOURNE FL   14 CITY-ST-2P							DIRECTORS IN 12	
13 STREET ADDRESS   2519 WATKINS DR	TITLE			1. 1 TiTL	F		] Change	
MELBOURNE FL	NAME			1.2 NAME				
TITLE	STREET ADDRESS							
NAME   STREET ADDRESS   25 19 WATKINS DR   23 STREET ADDRESS   24 CITY-ST-2IP	CITY-ST-ZIP						7.05	
23 STREET ADDRESS   24 CUTY - ST - ZIP			· —			<b>L</b>	] Change [_] Addition	
MELBOURNE FL		l .						
TILLE								
NAME							1 Change	
STREET ADDRESS   33 STREET ADDRESS   34 CITY - ST - ZIP							] onenge	
CHY-SI-7IP								
THLE								
NAME       42 NAMF         STREFT ADDRESS       43 STREET ADDRESS         CITY-ST-ZIP       44 CITY-ST-ZIP         TITLE       DELETE       5 1 TITLE         NAME       52 NAME         STREET ADDRESS       53 STREET ADDRESS         CITY-ST-ZIP       54 CITY-ST-ZIP         TITLE       DELETE       6 1 TITLE         NAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY-ST-ZIP       64 CITY-ST-ZIP							Change Addition	
STREFT ADDRESS   43 STREFT ADDRESS   44 CITY - ST - ZIP					1			
A C   I Y - S I - Z   P				4.3 STRE	ET ADDRESS			
TITLE         DELETE         5 1 TITLF         Change         Addition           NAME         52 NAME         53 STREET ADDRESS         53 STREET ADDRESS         53 STREET ADDRESS         54 CITY - S1 - ZiP         64 CITY - S1 - ZiP         Change         Addition           NAME         51 NAME         62 NAME         63 STREET ADDRESS         63 STREET ADDRESS         64 CITY - S1 - ZiP         64 CI		<b>.</b>		4.4 CITY	-ST-ZIF			
STREET ADDRESS         53 STREET ADDRESS           CITY-SF-ZIP         54 CITY-SF-ZIP           TITLE         DELETE         61 TITLE           NAME         62 NAME           STREET ADDRESS         63 STREET ADDRESS           CITY-SF-ZIP         64 CITY-SF-ZIP	•		DELETÉ				Change Addition	
CITY-ST-ZIP         5 4 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	NAME	52		5.2 NAM	: [			
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         62 NAME           STREET ADDRESS         6.3 STREET ADDRESS         CITY-ST-ZIP         6.4 CITY-ST-ZIP	STREET ADDRESS	SS 53		5 3 STRE	ET ADDRESS			
NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 CLY-ST-ZIP	CITY + ST + ZIP			5.4 CiTY	-ST-ZiP			
STREET ADDRESS  CITY-ST-ZIP  63 STREET ADDRESS  64 CITY-ST-ZIP	TITLE	DELETE 6 1		6 1 Tift	F		] Change   Addition	
CITY-ST-ZIP 64 CITY-ST-ZIP	NAME			6.2 NAM	Æ			
	STREET ADDRESS			63 STRE	EFF ADDRESS			
			THE ROOM BOLL OF THE REAL PROPERTY.			for the event on stated in Overland 140 07/09 V. Flands	ido Ctatutos I furthas	

ruo nereby ceruity mai me miormation supplied with mis ting is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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

× 3/29/96 Date Proce