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	
MALNIT	44

LONGOO

171

1. Corporation		22 (1)							
Principal Place of	of Business	Mailing Address				- I (0 0 10) 8 10 0 17 17 17 17 17 17 17	OTA (SOL ALDEI AIASI		AN MENN FRAN
736 NASSAU ROAD P. O. BOX 576 COCOA BCH. FL 32831 738 NASSAU ROAD P. O. BOX 576 COCOA BCH. FL 32831 COCOA BCH. FL 32931									
COCOA BCH. FL 32931 COCOA BCH. FL 32					3. Date Incorporated or Qualified 12/19/1984 3a. Date of Last 02/16			5	
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number 59-2505136			ied For Applicable
1 26 Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Ack		
2 27		27				5. Certificate of Status Desired		Fee Requ	uired
City & State		City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 M Added to 1	
3 Zip	Country	Z ip	Coi	untry		This corporation has liability for			
4	25	29	30	,		Florida Statutes Yes			
	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New F	legistered Age	ent	
				81 Nar	ne				
	BLE, JAMES			82 Stre	et Addre	ss (P.O. Box Number is Not Acceptat	ole)		
2955 P SUITE	PINEDA CAUSEWAY			83					
	DURNE FL 32940								
WELD	7011112 1 E 02040			84 City			FL	85 Zip Co	xae
12.	Signature, typed or printed name of registered agont OFFICERS AND	D DIRECTORS	13.		ure required	when reinslating: ADDITIONS/CHANGES TO OFF			IN 12
TITLE	DP VENABLE, JAMES	☐ DELETE		TITLE			U '	Change [J Addition
NAME STREET ADDRESS	738 NASSAU RD.			name Street addre	20				
CITY-ST-ZIP	COCOA BEACH FL			CITY-ST-ZIP					
TITLE	DS	DELETE		TITLE			ים	Change [Addition
NAME	COLEMAN, JAMES		2.21	NAME					
STREET ADDRESS	804 EAST HIBISCUS BLVD			STREET ADORE	ss				
CITY-ST-ZIP	MELBOURNE FL DV	DELETE		CITY - ST - ZIP TITLE				Change [Addition
TITLE NAME	SANDERLIN, EUGENE ALBI			NAME			ا الما		
STREET ADDRESS	500 KATHY DRIVE			STREET ADDR	FSS				
CITY-ST-ZIP	MERRITT ISLAND FL		3.41	CITY-ST-ZIP					
TITLE	DT	☐ DELETE	4, 1	TITLE				Change [Addition
NAME	PERSON, ARTHUR B.	· -	4.21	NAME					
STREET ADDRESS	1360 SOUTH PATRICK DRI	IVE		STREET ADDRE	:SS				
CITY-ST-ZIP	SATELLITE BEACH FL	☐ DELETE		CITY-ST-ZIP TITLE				Change [Addition
TITLE				NAME					
NAME STREET ADDRESS				STREET ADDRE	ESS				
CITY-ST-ZIP				CITY-ST-ZIP					
TITLE		DELETE		TITLE				Change [Addition
NAME			6.2	NAME					
STREET ADDRESS			. I	STREET ADDRI	SS				
CITY-ST-ZIP	y certify that the information supplied	with this filing is voluntarily for	rnished and	CITY-ST-ZIP	qualify fr	or the exemption stated in Section 119	3.07(3)(k). Florid	a Statutes	I further
	t the information indicated on this anni I am an officer or director of the corpo n Block 12 or Block 13 if changed, or o	uai report or supplemental ar oration or the receiver or trus on an attachment with an ad	nnuai repori itee empow Idress.						
SIGNAT	/ ///m	Munu	U			3/14/96 (407)			

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)