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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

0032262

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUI I. Corporatio	MEN n Name	IT#	<b>H37</b>	757

(2)

Suite, Apt # utc   Suite, Apt #, otc   Suite, Apt #, otc   Side, Apt #	Principal Place 2727 ATLANTIC JACKSONVILLE		Mailing Addre 2727 ATLANTK JACKSONVILLI	C BLVD	)i					1811 1881 1811 1888
2. Principal Process   2. A. Maling Address   3. El Number   Applied   Nov. App							· '			port
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Coy & State    Coy & State   Country   28	7	# CHC	<del></del> 1	#, etc.			5. Certificate of Status Desired	□ <b>&gt;</b>		
Zop		1.		te			6. Election Campaign Financing			<u> </u>
9. Name and Address of Current Registered Agent  FETWAY, THOMAS F., III 272 ATLANTIC BLVD.  JACKSONVILLE FL 32207  83  14 City  FL 85 Zip Code  64 City  FL 85 Zip Code  65 Zip Code  66 Zip Code  67 Charge Land Statutes  68 Zip Code  69 Zip Code  69 Zip Code  60 Zip				·			Trust Fund Contribution	, ,	•	,
PETWAY, THOMAS F., III 272 ATLANTIC BLVD. JACKSONVILE FL 32207  83  64 City  FL  85 Zip Code  64 City  FL  86 Zip Code  67 OvaP and 627 ISSE Texts Statutus, the above named corporation submits this statement for the purpose of changing its region office or registered agent. I critical in a time State of Fordis Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registing agent. I am fund ar with and accept the obligations of, Section 677 0505, Front Statutus, the above named corporation's board of directors. Thereby accept the appointment as registing agent. I am fund ar with and accept the obligations of, Section 677 0505, Front Statutus  SIGNATURE  10 CTD  11 Personal part of the previous agent and to displate.  12 OFFICE SAND DIRECTORS IN 19 DIRECTORS	7	<b>├</b>	} ·	ļ.	´	1	· · · · · · · · · · · · · · · · · · ·	_ ~		199.032,
PETWAY, THOMAS F., III 272 ATLANTIC BLVD. JACKSONVILLE FL 32207    B2   Street Address (P.O. Box Number is Not Acceptable)	1	25  9. Name and Address of Currer	[29] nt Registered Agen	<u>]3</u>	0]	<del></del>				
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JACKSONVILE FL 32207  83  84					92	Ctroot Add	deeps (D.O. Pay Number is Not Assessed			
Box   City   FL   Box   Zip Code					62	Sileet Aut	dress (F.O. box Number is Not Acceptate	ле)		
III. Purpose of the processore of Sections 607 0502 and 607 1508, floridal Statutes, the above named corporation submits this statement for the purpose of changing its region office or registered agent or both in the State of Frontials, such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I are laumin ar with, and accept the obligations of, Section 607 0505, Floridal Statutes  SIGNATURE    State   Section   S					83					
III. Pursuant to the processors 67 Suctions 607 0502 and 607 1509, florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. Or both in the Suction of Fordida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am family and accept the obligations of, Section 607 0505, Florida Statutes  SIGNATURE					84	City			Zin C	ode
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14. I do hereby certify that the information supplied with this thing to s not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the	ITTE  VAME  STREET ADDRESS  CHY ST-ZIP  TITTE  VAME  STREET ATORESS  CHY ST-ZIP  THE  VAME  STREET ATORESS  CHY ST-ZIP  THE  VAME  STREET ATORESS  CHY ST-ZIP  THE  VAME  NAME			DELETE	34 CITY- 41 TPLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 61 TITLE 6.2 NAME	ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP			Change	Addit