SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DOE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED AND

97 AUG -5 AM 8: 06

SECRETARY OF STATE

DOCUMENT # H46323 (2) WILLIAM F. CALDWELL & ASSOCIATES, INC.										TALLAHASSEE. FLORIDA				
Principal Place of Business Mailing Address														
2622 LIGHTHOUSE BEND					2622 LIGHTHOUSE BEND									
PONTE VEDRA BEACH FL 32082					PONTE VEDRA BEACH FL 32082									
US					US				DO NOT WRITE	IN THIS	SPACE			
									3. Date Incorporated or Qualified					
• • • • • • • • • • • • • • • • • • • •					N				03/06/1985	06	3/19/1996			
	Principal Pi	lace of Busin	ness	28	2a. Mailing Address				. FEI Number Applied For					
21	0.11			26					59-2592364			ot Applicable		
	Suite, Apt.	#, etc.			Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re			
22	City & State	Α		27	City & State				a fileding of the filed		·	· `		
23	Ony a oran	State			28				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1			
E31.	Zip	Country			Zip		Country							
24		25			29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes \(\square\) No					
		g, Name			ent Registered Agent				1	10. Name and Address of New Registered Agent				
BRANT, MOORE, SAPP, MACDONALD & WELLS,P.A.														
50 N LAURA ST #3100								Stroot /	Addrone	(P.O. Box Number is Not Acceptab	lo)			
JACKSONVILLE FL 32202							82	oureer /	Addiess	(r.o. box nomber is not acceptat	ie)		ļ	
					83						··········			
							-							
							84	City			FL	85 Zip (Code	
11.	Pursuant t	to the provis	ions of Sections 607.	.0502 and	607.1508, Florida Stat	tutes, the a	above-	named	corpora	tion submits this statement for the p		- 1 [s registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re office 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 reg agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												registered		
SIG	NATURE									·				
Signature, typod or purited name of registered agent and t								e required w		DATE				
12.	OFFICERS AND			AND DIRE	DELETE		13.		Т	ADDITIONS/CHANGES TO OFFIC	ERS ANI	DIRECTOR Change	S IN 12 Addition	
NAM	A				1.3 1.3		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS					CH CHANGE	L.J Addition	
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	EET ADORESS					2.3 STREET ADDRESS			-08/11/	97(01067	007 🗀 l		
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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 eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13/I changed, or on nattachment with an address.