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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H47960

(0)

F. B. ESTERGREN, P.A.

FILED Jan 28 1997 8:00am Secretary of State

316 YACHT C		P.O. DR	Mailing Address P.O. DRAWER 2167 FT. WALTON BEACH FL 32549-2167									
US		US					3.	Date Incorporated or Qualified 03/14/1985		te of Last R	eport	
2. Poncipal F	Place of Business	2a. Ma	ing Address				4.	FEI Number	1 2-1-		plied For	
21		26						59-2506934			t Applicable	
Suite, Apt	#, etc	├- - ¬	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75		
22		27	P. Clate		40					Fee Re	·	
City & Sta	₩:	h = 1	& State				6.	Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
23 Zip	Country	28 Zip		Count	try							
24 25		1	29 30				°.	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
124	9. Name and Address of Curr	and the contract of the second		7			10.	Name and Address of New Re	jistered A	gent		
EST	Tergren, F. B.			8	11	Name						
	YACHT CLUB DRIVE			8	2	Street Add	ress (F	O. Box Number is Not Acceptab	e)			
FT.	WALTON BEACH FL 32548								·- /			
				8	:3							
				8	4	City			FI	85 Zip (Code	
SIGNATURE	and lame ar with, and accept the ob-	agent a chtev if appl	licatile (NOTE	Registered A		i. nt signature requ			DATE			
12.		NO DIRECTOR	RS DELETE	13.			***************************************	ADDITIONS/CHANGES TO OFFIC	ERS AND		S IN 12 Addition	
DRH	OP Estergren, F. B.		[] beter		1.1 TITLE 1.2 NAME			Wice Pres.		Change	L. ADOINON	
NAME STREET ADORESS	AAA VAOLIT OLLID DOUG					ADDRESS		John Jay Gontai	cek			
Gift ST ZIF	FT. WALTON BEACH FL 32	548		1.4 CITY				92 Eglin Parkwa	y N.	E./		
TOTAL ZIE	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	<u> </u>	DELETE	2.1 THTL		1-211		Ft. WaltonBeach,	FL	E344	► ☐ Addition	
NAME	wick was a standard and a standard a	XXXX		2.2 NAM	1E					3254	\$	
STREET ADORESS	жүүүүү хэдфффүх хр уууууу	GATK XAKXEK		2 3 STR	EET A	ADDRESS						
DH1-ST-2IF	APAKY WASATASAK XYSAK			2. 4 CIT	Y - S	ST - ZIP						
1.11.2			☐ DELETE	3.1 TITL:	Ε					Change	Addition	
NAME				3 2 NAM								
STREET ADDR: SS						ADDRESS						
C(E) ST-Z(E			DELETE	3 4. CIT	*****	ST - ZIP				☐ Change	Addition	
T III F MAME			L DELLIE	4 2 NAM						L. Unange	Addition	
STREET ADDRESS				1		ADDRESS						
0.14-\$1-7e				4.4 CITY								
TIT E			DELETE	5 1 TITL						Change	Addition	
NAME				52 NAM	Œ	ŀ		•				
STREET ADDRESS				53 STRI	EFT.	ADDRESS						
0.75-81-76				5.4 CHY	- S1	T-ZIP		****				
T/F , F			DELETE	61 TITL				•		L Change	Addition	
NAME				62 NAM		1						
STREET ADDRESS.	1			6.3 STR	FFT.	ADDRESS						

14. High hereby cert fy 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 inclicated 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if changed

SIGNATURE AND TYPED OR PRINTED NAME OF SUNING OFFICER OR DIRECTOR

FB. Estor Par 18/84 944243 CH3

PTIGFIE W

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