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 # H49104

(3)

Principal Plac	e of Business	Mailing Address	-		
C/O WALTER L. SCHAFER. JR. C/O WALTER L. SCHAFE 6 BAYWOOD DRIVE 6 BAYWOOD DRIVE					
PALM HARBOI	R FL 34683	PALM HARBOR FL 34683	1-1301	3. Date Incorporated or Qualified	3a. Date of Last Report
				04/01/1985	05/01/1996
2. Principa! f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	·=,	59-2530125	Not Applicable
Surte, Apt.	#, elc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	F)	City & State		6. Election Campaign Financing	Fee Required
23	Ç.	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30		Yes No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
	HAFER, WALTER L., JR.		81 Name		
	1 ESTANCIA BLVD BLDG C		62 Street Add	ress (P.O. Box Number is Not Accepta	ble)
ULE	ARWATER FL 34621-9608		83		
			84 City		FL 85 Zip Code
SIGNATURE	Signative lighest or protect name of registered a		DTE Registered Agent signature requi	poration submits this statement for the tion's board of directors. I hereby accelered when reinslating) ADDITIONS/CHANGES TO OFFI	DATE
TITLE	DPT	DELETE	1.1 TITLE		Change Addition
NAME	BURROUGHS, RICHARD E.		1.2 NAME		
STREET ADDRESS	6 BAYWOOD DRIVE		1.3 STREET ADDRESS		
CHY-ST-20F	PALM HARBOR FL DVS	DELETE	1.4 CITY-ST-ZIP 21 TITLE		Change Addition
NAME.	BURROUGHS, KAREN L.	ind pecific	22 NAME		El piningo El rioditori
STREET ADDRESS	6 BAYWOOD DRIVE		2.3 STREET ADDRESS		
CHY-SI-Z#	PALM HARBOR FL		2.4 CITY-ST-ZIP		
DILE		☐ DELETE	. 3.1 TITLE	7	Change Addition
NAME			3.2 NAME		
STREET ADDRESS.			3.3 STREET ADDRESS		
CHY+ST-7IP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		Carl Descrip	4, 2 NAME		The control of the control
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CHY-ST-ZIP TIFLE		DELETE	54 CITY-ST-ZIP 61 TITLE		Change Addition
NAME		□ pricit	62 NAME		El Apprile El Manifati
STREET ADDRESS			6.3 STREET ADDRESS		
STREET MODBLOS			G.S STREET POOREGO		

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address. OBSCHAFFRAREN L. BURROUGHS 4/26/97 (8/3)

FILED

May 06 1997 8:00am

Secretary of State