FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham

. =	1996	··/	ary of State CORPORATIONS		
DOCUN	MENT # H5177	7 (1)			
•	I CORPORATION				
Principal Place	of Business	Mailing Address			
% JAMES E. HENDREN 2730 ATLANTIC STBOX 83 MELBORUNE BEACH FL 32951		% JAMES E. HENDREN 2730 ATLANTIC STBOX 83 MELBORUNE BEACH FL 32951			T
				 Date Incorporated or Qualified 03/28/1985 	3a. Date of Last Report 04/17/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt #, etc.		59-2531482	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		Oity 8 State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	7ip	Country	Trust Fund Contribution 8. This corporation has liability for i	Added to Fees
24	25	29	30	Florida Statutes	□No
	g, Name and Address of Current I	Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
HENIOD	DENI HAMBO E				
HENDREN, JAMES E. 2730 ATLANTIC STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable	e)
	OURNE BEACH FL 32951		83		W #. =#=
			84 City		OF Zw Code
			,	ration submits this statement for the pur	FL 85 Zip Code
familiar with	so agent, or both, in the State of Florida h, and accept the obligations of, Section State the type for picted han collected a jiet an OFFICERS AND I	1 607.0505, Florida Statutes.	to by the corporation's boal.	rd of directors. Thereby accept the appoint with the control of th	untment as registered agent. I am
TUTGE	D OFFICERS AND I	DEFETE	13. 1 1 Title	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	HENDREN, MARGARET H.		1.2 NAME		Onlyingo Addition
STREET ADDRESS	2730 ATLANTIC ST.,BOX 83		1.3 STHEET ADDRESS		
CI*Y - S* - ZIP	MELBOURNE BEACH FL		1.4 CITY - S1 - 7IP		
TITLE	DP	☐ DELETE	2 1 TITLE		Change Addition
NAME STREET ADDRESS	HENDREN, JAMES E. 2730 ATLANTIC ST.,BOX 83		2.2 NAME		
CITY-ST-ZIP	MELBOURNE BEACH FL		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.11/16		Change Addition
NAM!			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
C-TY-ST-Z-P			3.4 C+TY - ST - ZIF		
TITLE		DELETE	4 1 THE		Change Addition
NAME STREET ADDRESS			4.2 NAME		
CITY-S1-ZIP			4.3 STREET ADDRESS 4.4 City - St - Zip		
THILE		DELETE	5 1 TITLE		Change Addition
NAM:			5.2 NAME		
STREET ADDRESS			5 3 STREET ADORESS		
CITY-ST-ZIP		Figure	5.4.0(1Y-S1-ZIP		
TITLE		DELETE	6 13/11/6		Change Addition
NAME			6.2 NAME		

14. I do hereby certify that the information supplied with this filting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 value of the second of the corporation.

6.3 STREET ADDRESS 6 4 CITY - S1 - 2IP

SIGNATURE:

STREET ADDRESS

CR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)