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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1996 DIVISION OF CO		CORPO	RPORATIONS						
1. Corporal	IOTT I SCIPTIO	162818	(0)		******	18.1 1 186 ft	**************************************			
PAH	K FOREST DEVELO	PIMENT CORP	•					1 (2000)		
Principal Pla	ce of Businese									
Principal Place of Business Mailing Address P.O. BOX 21238 P.O. BOX 21238								i sadsadii miiri diilin dibbi Ydidi (ii	IAL IEUG ATON DIAN AND	EL MYORE MYNYL MYNYL 1801
SARASO	r 21238 FA FL 184240-8958		P.O. BOX 21238 SARASOTA FL 04240 8 1	DEA-						
US			US					Date Incorporated or Qualified	3a. Date of La	
9 Principal	Place of Business							06/14/1985		st нероп I /1995
2. Principal	race of Business	₁	Mailing Address					4. FEI Number	00/0	Applied For
Suite, Ap	t. #, etc.	26	Suite, Apt. #, etc.	·				58-1645811		Not Applicable
22		27						5. Certificate of Status Desired	1 1	.75 Additional ee Required
City & Sta	ate	28	City & State				******	6. Election Campaign Financing	\$!	5.00 May Be
Zip 24 3427	6-4238 25 Country		^{Zip} 34276-4238	Co	untry			Trust Fund Contribution 8. This corporation has liability for i	ntangible tax unde	dded to Fees er s. 199.032,
- 1041	9. Name and Addres	s of Current Regist	ered Agent	30	Ţ			Florida Statutes Yes 10, Name and Address of New R	□ No	
					81	Name)	TO, Marile and Address of New H	egistered Agent	
JOHNSON, MICHAEL						Stroot	Address (P.O. Box Number is Not Acceptable)			
2018 OAK TERRACE					82	0,,001		s in too box number is not Acceptab	e)	
SARA	SOTA FL 34231				83					
·						City	····		 85	Zip Code
11. Pursuant	to the provisions of Section	ns 607,0502 and 607	.1508, Florida Statutes,	the abo	L] ≫e-r	amed c	orporation	On submits this statement for the num	FL °°	,
familiar w	ith, and coept the obligation	itate of Florida. Such one of Socion 607.0	change was authori zed 505, Florida Statutes,	by the	corp	oration's	board o	on submits this statement for the purp of directors. I hereby accept the appo	intment as registe	ts registered office red agent. I am
SIGNATURE '	Signature, typed or print, put of	strong	Michael	J.	Jo	hnsc	n		4/26/9	·
12.		registered agent and title it as FICERS AND DIRECT	Pleable (NOTE: I	Registered	Agen	l signature	required wh	ion reinstatingi	BATE Y	2
TITLE	VAS		DELETE	1.17	ITLE		Ι	ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	
NAME	WHITEHEAD, VICH	(1		12 N/	ME				L_1 Chang	ge
STREET ADDRESS	2197 CANTON RO	AD, SUITE 201		1.3 \$1	REET	ADDRESS				
CHY-ST-ZIP TITLE	MARIETTA GA		Fri P. C. P. C.	1.4 CI		- ZIP				1
NAME	PD Terry, Edward	,	DELETE	2.1 TI 2.2 NA				4	Chang	e Addition
STREET ADDRESS						I D D D C C C		# * = =	•	ł
CITY-ST-ZIP	Y-ST-ZIP MARIETTA GA					ADDRESS - Zip	Sui	ite # 355		1
TITLE	VAS		DECETE	3 1 TI		- 211			Chang	a
NAME	JOHNSON, MICHA			3 2 NA	MÊ				L., Charly	e 🔲 Addition
STREET ADDRESS	2018 OAK TERRAC	Œ		3.3 S	REET	ADDRESS				
TITLE	SARASOTA FL		Section	3.4 CIT		- ZIF		TT		
NAME	JOHNSON, MICHA	Ci .	DELETE	4.1 11					Change	Addition
STREET AODRESS	2018 OAK TERRAC			4.2 NAI		DORESS				
CiTY-ST-ZIP	SARASOTA FL	·-		44 CH						
TITLE	VST		DELETE	5 1 TIT		****			Change	Addition
NAME CARECA ADDRESS	OWINGS, KENT S			5.2 NA	Λέ [‡]			40000183 -05/22/960104	4444	/1000001
STREET ADDRESS	2197 CANTON RO	AD, SUITE 201		5.3 STR	eet!A	DOPESS		~U5/ZZ/96~~\)1()4	U037	₹ £
CITY - S1 - ZIP TITLE	MARIETTA GA		F) belete	5.4 CHT		7IP	· 	***200.00		Z //
NAME			DELETE	6. 1 11ft					Change	Addition
				6.2 NAN	HL.					41

64 CITY-S1-ZIP

14. If do hereby certify that the information supplied with this filing 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 appears in Block 12 or Block 13 if change it every an attachment with an address. an attachment with an address

63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

4/24/96

Daytin e Phone #