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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

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DOCUMENT	#
 Corporation Name 	

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Ζφ

Suite, Apt. #, etc.

City & State

H65163

(8)

PARDUE, HEID, CHURCH, SMITH & WALLER OF TAMPA, I

Mailing Address Principal Place of Business 4915 W CYPRESS ST 200 **TAMPA FL 33607** US 2a. Mailing Address 2. Principal Place of Business

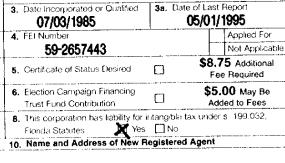
Country

9. Name and Address of Current Registered Agent

% WILLIAM P. PARDUE, JR 1403 WEST COLONIAL DRIVE ORLANDO FL 32804

Suite, Apt. #, etc.

City & State



PARDUE JR., WILLIAM P. 1403 WEST COLONIAL DRIVE ORLANDO FL 32804

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	10. Name and Address of New Registered Agent								
81	Name								
82	Street Address (P.O. Box Number is Not Acceptable)								
L									
83									

11. Pursuant to the provisions of Sections 607,0502 and £07,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Suith change was authorized by the corporation's heard of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

Country

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SIGNATURE: "	greature, speed on protest name of registered July's Careff (1911 b)	potaties (NOME E	kojsheraci Ager Lagnahire c	espicial what interestating) DATE				
12.	OFFICE OF AND DISTORDE			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	D	DELETE	L 1 TITLE		Change	Addition		
NAME	PARDUE JR., WILLIAM P.		1.2 NAME					
STREET ADDRESS	3016 TEMPLE TRAIL		1.3 SPREET ADDRESS					
CITY-ST-ZIP	MAITLAND FL		1.4 CITY - S* - ZIP					
TITLE	D	☐ DELETE	2 1 HIVE	0,5,7	Change	Addition		
NAME	CHURCH, LARRY A.		22 NAME					
STREET ADDRESS	4925 LAKE GATIN WOODS CT		2.3 STREET ADORESS					
CHY-SI-ZIP	ORLANDO FL		2.4 C(TY \$1 - Z(P)					
TITLE	DST	DELFTE	3 1 THILE		Change	Addition		
NAME	SILVERSTEIN, MARK	• •	3.2 NAME					
STREET ADDRESS	4915 W CYPRESS		a 3 STREET ADDRESS					
CITY - ST - ZIP	TAMPA FL		3.4.C/TY - \$1 - 7/F					
TITLE	DP	DELETE	4 1 11/16		Change	Addition		
NAME	BRADFORD, JOHNSON	- 1	4.2 NAME					
STREET ADDRESS	4915 W CYPRESS		4.3 STREET ADDRESS					
CITY - S1 - ZIP	TAMPA FL		4 4 CITY - ST - ZIF					
TITLE	D	☐ DELETE	5 1 T TLE	D, P	Change	☐ Addition		
NAME	MOREYRA, ROBERT		5.2 NAME	911	-			
STREET ADDRESS	1403 W COLONIAL DR		5 RISTHEEL ADDRESS					
CITY-S1-7IP	ORLANDO FL		5.4 CITY - ST - ZIP					
TITLE	W1-02-02-02-02-02-02-02-02-02-02-02-02-02-	DELE IE	6 CTOTLE		Change	Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STHEET ADDRESS					
CITY - ST - ZIP			64 CITY - ST - ZIP					
0111.01.74	L	Character at a stock of the formulate	and not done not ou	of the the exemption stated in Section 119 07/3)(k)	 Florida Statu 	tes. I further		

I do hereby certify that the information supplied with this filing is voruntarily 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 Brock 12 or Brock 13 if changed, or on air attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR POPERTY TO DISCOURSE TO THE CONTROL OF THE POPERTY OF THE P