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 # H72292

(6)

FISHER Principal Place 2265 LEE RD SUITE 117 WINTER PARK	& FISHER, INC.	Mailing Address 2265 LEE RD SUITE 117 WINTER PARK FL 32789-10			
US US			·	3. Date incorporated or Qualified 08/15/1985	3a. Date of Last Report 04/29/1996
		2a. Malling Address 26		4. FEI Number 59-2565910	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes	rintangible tax under s. 199.032, Yes No
	9. Name and Address of Curro	10. Name and Address of New R	egistered Agent		
FISH	KER, ALBERT F.		81 Name		
521 VENTRIS CT			82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
MAITLAND FL 32751			83	<u></u>	
			84 City		85 Zip Code
			1111		
office or r agent. La SIGNATURE				poration submits this statement for the tion's board of directors. I hereby acce	
12.	5 greature, typed or printed name of registered a	ngent and title if applicable (NOTI ND DIRECTORS	Registered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFF	CATE ICERS AND DIRECTORS IN 12
iz. filif	VD OFFICERS A	DELETE	1.1 TITLE	ADDITIONO/OF CANCEL TO OFF	Change Addition
NAME	FISHER, ALBERT F.		1.2 NAME		
STREET ADDRESS	521 VENTRIS COURT		1.3 STREET ADDRESS		
CITY - ST - ZIF	MAITLAND FL		1.4 CITY-\$T-ZIP		To the second se
TITLE	PD SIGNED ALBERT E III	DELETE	2.1 TITLE		Change Addition
NAME CERTIFICATION OF CO.	FISHER, ALBERT, F, III 27 JAMES AVE		2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS Crity Styzip	ORLANDO FL		2.4 CITY-ST-ZIP		
THEF	SO SO	DELETE	3.1 TITLE		Change Addition
NAME	FISHER, MARY ANNE	\	3.2 NAME	•	
STREET ADDRESS	521 VENTRIS CT		3.3 STREET ADDRESS		
CHTY - ST - ZHP	MAITLAND FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE			4.2 NAME		Orango Nounce
NAME STREET ADDRESS			4.3 STREET ADDRESS		
City-ST-7IP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	Marie Company	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP

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 chapted, or on an attachment with an approximation.

SIGNATURE:

4/25 97 L

407-539-214

FILED

May 02 1997 8:00am

Secretary of State