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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
UIVISION OF CORPORATIONS

1996

Base   Torrey Pines   Terrace   Base   Torrey Pines   Terrace   Policy   Pines   Terrace   Policy   Pines   Pines   Terrace   Policy   Pines	3. Date Incorporated or Qualified 10/25/1985 01/30/1995 4. FEI Number S9-2611062 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for intangible tax under s 199.032.
2a. Making Address  2b. Suite. Apt. #, etc.  Suite. Apt. #, etc.  Suite. Apt. #, etc.  City & State  27  City & State  28  29  29  30  9. Name and Address of Current Registered Agent  81 Name  MAPPLE, DEENA BRUSH 8806 TOREY PINES TERRACE ORLANDO FL 32819  82 Street  83 Bay  64 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named concept stered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with and ascept the originations of Section 607.0505, Florida Statutes  SIGNATURE  12. OFFICERS AND DERECTORS  13. INTEREST AND DERECTORS  14. OFFICERS AND DERECTORS  15. ORLANDO FL  16. UPD  MAPPLE, DEENA BRUSH  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  MAPPLE, ANDREW H.  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  MAPPLE, ANDREW H.  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  MAPPLE, ANDREW H.  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  MAPPLE, ANDREW H.  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  MAPPLE, ANDREW H.  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  MAPPLE, ANDREW H.  8806 TOREY PINES TERRACE ORLANDO FL  16. UPD  17. UPLETE  18. UPD  MAPPLE, ANDREW H.  18. UPD  MAPPLE, ANDREW H.  18. UPD  MAPPLE, ANDREW H.  18. UPLETE  1	10/25/1985  4. FEI Number  59-2611062  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  7. This corporation has liability for intangible tax under s. 199.032.
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Zip  City & State  Zip  Country  Zip  Country  Zip  Since Agent  Agent  Bill Name  MAPPLE, DEENA BRUSH  8806 TOREY PINES TERRACE  ORLANDO FL 32819  Bill City  11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named or or registered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with and ascept the originators of Section 607.0505, Florida Statutes  SIGNATURE  SIGNATURE  DEENA BRUSH  MAPPLE, DEENA BRUSH  Bill City  11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named or or registered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with and ascept the originators of Section 607.0505, Florida Statutes  SIGNATURE  DEENA BRUSH  SIGNATURE  1 1 TITLE  1 2 NAME  1 2 NAME  1 2 NAME  1 2 NAME  2 NAME  3 SIREET ADDRESS  ORLANDO FL  CI DELFTE  3 1 TITLE  AND  SIREET ADDRESS  ORLANDO FL  CI DELFTE  3 1 TITLE  AND  SIREET ADDRESS  ORLANDO FL  CI DELFTE  3 1 TITLE  AND  SIREET ADDRESS  3 SIR	4. FEI Number  59-2611062  Not Applied For Not Applicable  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for intangible tax under s 199.032.
Suite, Apt. #, etc.    City & State   City & State	5. Certificate of Status Desired S8.75 Additional Fee Required  6. Election Campaign Financing Trust Fund Contribution S4.00 May Be Added to Fees  8. This corporation has liability for intangible tax under s 199.032.
City & State   City & State   Country   Z8   Z8   Z9   30     Z9   Z9   30     Z9   Z9   30     Z9   Z9   Z9   Z9   Z9   Z9   Z9	Fee Required     Fee Required     S. Election Campaign Financing     Trust Fund Contribution     Added to Fees     S. This corporation has liability for intangible tax under s 199.032.
City & State    Zip	Trust Fund Contribution Added to Fees  8. This corporation has liability for intangible tax under s 199.032.
Page	This corporation has liability for intangible tax under s 199.032.
9. Name and Address of Current Registered Agent  MAPPLE, DEENA BRUSH 8806 TOREY PINES TERRACE ORLANDO FL 32819  63. Street  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named or or registered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with and accept the colligations of Section 607.0505, Florida Statutes  SIGNATURE  12. OFFICERS AND DREE GTORS  13.  11. THE  WAME MAPPLE, DEENA BRUSH 12. NAME 13. STREET ADDRESS 14. CHY-ST-ZIF  MAPPLE, DEENA BRUSH 12. ORLANDO FL  WAME MAPPLE, DEENA BRUSH 13. STREET ADDRESS 14. CHY-ST-ZIF  MAPPLE, ANDREW H.  SCHRITTANDRESS 14. CHY-ST-ZIF  MAPPLE, ANDREW H.  SCHRITTANDRESS 15. STREET ADDRESS 16.	
MAPPLE, DEENA BRUSH 8806 TOREY PINES TERRACE ORLANDO FL 32819  11. Pursuant to the provisions of Sections 607,0502 and 607,1506, Florida Statutes, the above named or or registered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with and accept the orligations of Section 607,0505, Florida Statutes  SIGNATURE  12. OFFICERS AND DIRECTORS  13.  THE PD	Florida Statutes 📝 Yes 🔲 No
MAPPLE, DEENA BRUSH	10. Name and Address of New Registered Agent
8806 TOREY PINES TERRACE ORLANDO FL 32819  84 Orty  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named or or registered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with and accept the onligations of Section 607.0505, Florida Statutes  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13.  OUR  MAPPLE, DEENA BRUSH  12 NAME  MAPPLE, DEENA BRUSH  12 NAME  SIGNATORY PINES TERRACE  ORLANDO FL  NAME  MAPPLE, ANDREW H.  SIGNATIONS  8806 TOREY PINES TERRACE  ORLANDO FL  NAME  MAPPLE, ANDREW H.  SIGNATIONS  8806 TOREY PINES TERRACE  ORLANDO FL  DELETE  3 THEE  ANDRESS  ONLANDO FL  DELETE  3 THEE  ANDRESS  ORLANDO FL  DELETE  3 THEE  ANDRESS  3 STREET ADDRESS  3 STREET ADDRESS  ALCITY ST-ZIP  THEE  DELETE  4 THEE  ALCITY ST-ZIP  THEE  DELETE  4 THEE	
DELETE   D	ddress (P.O. Box Number is Not Acceptable)
ORLANDO FL 32819  84 Oty  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named of or registered agent, or both, in the State of Florida Such change was authorized by the corporation's familiar with land accept the corlogations of. Section 607.0505, Florida Statutes  SIGNATURE  SUCCESSIFICATION FOR AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. TITLE  PD	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named of or registered agent, or both, in the State of Florida Such change was authorized by the corporation's farahar with and accept the collegations of Section 607.0505, Florida Statutes   SIGNATURE	
Second Form   Apple	EI 85 Zip Code
MAPPLE, DEENA BRUSH   12 NAME   13 STREET ADDRESS   8806 TOREY PINES TERRACE   13 STREET ADDRESS   14 CITY-ST-ZIF   ORLANDO FL   17 TITE   22 NAME   22 NAME   22 NAME   23 STREET ADDRESS   24 CITY-ST-ZIF   ORLANDO FL   17 TITE   27 TITE   27 NAME   27 TITE   27 NAME   28 NAME   28 NAME   28 NAME   28 NAME   28 NAME   28 NAME   37 TITE   37 TITE   38 NAME   38 NA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
13 STREET ADDRESS	Change Addition
ORLANDO FL	
DELETE   VPD	
	Change Addition
24 C-TY-ST-ZIP     24 C-TY-ST-ZIP     24 C-TY-ST-ZIP	
DELETE   3.1 THE   3.2 NAME   3.2 NAME   3.3 STREET ADDRESS   3.3 STREET ADDRESS   3.4 CTY   ST-ZIP   1.15   DELETE   4.5 THE	
NAME         3.2 NAME           STREET ADDRESS         3.3 STREET ADDRESS           STATE         3.4 CTY ST-ZIP           FILE         □ DELETE         4.1 TITLE	Change Addition
11   S1   ZP	
TILE DELETE 4:TITLE	
42 NAME	☐ Change ☐ Addition
STAGET ASSIRES ADORESS	
C In ST. 7.P. 4.4 CITY-ST-2P	•
DELETE 5.11DE	Change Addition
S 2 NAME	
53 STREET ADDRESS	
DELEJE € E TITUE € 2 NAME	
STREET ADDRESS 63 STREET ADDRESS	T cuantle T Andrian
CITY ST 24P 64 CITY ST 24P	☐ critille ☐ Motiron
14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not quicefully that the information indicated on this arriver report or supplemental annual report is true and a	□ cuange □ Addition

SIGNATURE:

CHATURE AND THEE ON PRINTED NAME OF SANING OFFICER OR BIRECTOR

1/23/95

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