## 5-13-97 B- 1109 -NC FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** 



FLORIDA DEPARTMENT OF STATE

May 13 1997 8:00am

CORPORATION ANNUAL REPORT 1997			Sandra B, Mortham Secretary of State DIVISION OF CORPORATIONS			Secretary of State		
	MENT #   ETON PRODUC	H86425 ctions, inc.	(6)					
Principal Play	na of Business	<del>-</del>	Mailing Address					
Principal Place of Business  N. J. PENDLETON GAINES  1405 DOLIVE DRIVE  ORLANDO FL \$2803			% J. PENDLETON GAINES 1405 DOLIVE DRIVE ORLANDO FL 32803-1907			(		
2. Principal I	Place of Business	<del></del>	2a. Mailing Address		· · · · · · · · · · · · · · · · · · ·	3. Date Incorporated or Qualified 11/15/1985 4. FEI Number	3a. Date of Last R 04/23/1996	
2. Principal Place of Business 21			28. Mailing Andress			59-2623669	F	pplied For ot Applicable
Suite, Apt.	. #, etc.		Suite, Apt. #, étc.			5. Certificate of Status Desired	S8.75	Additional
City & Stat	la .		City & State				Fee Re	equired
23	10	ļ.				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip <b>24</b>	25			Countr 30	у		J Yes □ No	s. 199.032,
		ddress of Current Re	egistered Agent	81	Name	10. Name and Address of New Ro	egistered Agent	
	ines, J. Pendlet 16 dolive dr.	ON						
	LANDO FL 32803		82			dress (P.O. Box Number is Not Acceptal	ble)	
	•			83	3			
				84	City		85 Zip	Code
· · · rursuant				o, the atten	AC TREATED COL	rporation submits this statement for the j	purpose of changing it	ts registered :
agent. I a	am tamiliar with, and	aname of registered agent an	is of, Section 607.0505, Flor	Hagistered Ac	)\$ 	rporation submits this statement for the ation's board of directors. I heroby account when tensioning)	DATE	
agent. I a SIGNATURE 12.	am tamiliar with, and	accept the obligation	is of, Section 607.0505, Flor dide!tapplicable (NOTE RECTORS	Ragistered Ac	)\$ 		DATE CERS AND DIRECTOR	RS IN 12
agent. I a	sm familiar with, and signature, typed or poster	accept the obligation name of registered agent are OFFICERS AND DI	is of, Section 607.0505, Flor	Hagistered Ac	)\$ 	urad when constating)	DATE	
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or penting PO GAINES, DAVIS 1405 DOLIVE C	I accept the obligation I have of registered agent are OFFICERS AND DI PENDLETON PRIVE	is of, Section 607.0505, Flor dide!tapplicable (NOTE RECTORS	Hagistered Ac  1.1 HILE  1.2 NAME	)\$ 	urad when constating)	DATE CERS AND DIRECTOR	RS IN 12
AGONT. I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GAINES, DAVIS 1405 DOLIVE C ORLANDO FL	I accept the obligation I have of registered agent are OFFICERS AND DI PENDLETON PRIVE	is of, Section 607,0505, Flor their Englicable (NOTE RECTORS DELETE	Hagistered As  13. 11 THLE 12 NAME 1.3 STREE	est signature requirements	urad when constating)	DATE CERS AND DIRECTOR Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or penting PO GAINES, DAVIS 1405 DOLIVE C	Dispersion of registered agent are OFFICERS AND DISPERSION DESCRIPTION DRIVE 32803	is of, Section 607.0505, Flor dide!tapplicable (NOTE RECTORS	Hagistered Ac 13. 1.1 HILE 12 NAME 1.3 STREE	est signature requirements	urad when constating)	DATE CERS AND DIRECTOR	RS IN 12
SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PO GAINES, DAVIS 1405 DOLIVE D GAINES, J. PEI 1405 DOLIVE D GAINES, J. PEI 1405 DOLIVE D	Description of registered agent and OFFICERS AND DISPRISE PENDLETON DRIVE 32803  NOLETON DRIVE	is of, Section 607,0505, Flor their Englicable (NOTE RECTORS DELETE	Hugistered Ac 13. 1.1 HULE 12 NAME 1.3 STREE 1.4 CHY-21 THEE 2.2 NAME	est signature requirements	urad when constating)	DATE CERS AND DIRECTOR Change	RS IN 12
AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL 3 STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL 3	Description of registered agent and OFFICERS AND DISPRISE PENDLETON DRIVE 32803  NOLETON DRIVE	is of, Section 607.0505, Flor their Englicable (NOTE RECTORS DEFETE DEFETE	Hagistered Ac  13. 1.1 THLF 12 NAME 1.3 STREE 1.4 CHY- 2.1 THLF 2.2 NAME 2.3 STREE 2.4 CHY-	I ADDRESS  T ADDRESS	urad when constating)	CERS AND DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD	PENDLETON PRIVE 32803	is of, Section 607.0505, Flor their Englicable (NOTE RECTORS DELETE	Hagistreed Ar   13.   1.1   111   15   12   MAME   1.3   STREE   1.4 CHY   2.1   11.1   1.2   MAME   2.3   STREE   2.4 CHY   3.1   11	I ADDRESS  T ADDRESS	urad when constating)	DATE CERS AND DIRECTOR Change	RS IN 12
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL 3 STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL 3	A D.  January of registered agent are OFFICERS AND DI PENDLETON DRIVE 32803  A D.  A D.	is of, Section 607.0505, Flor their Englicable (NOTE RECTORS DEFETE DEFETE	Hagistred Ar  13. 13. HILL 12 NAME 1.3 STREE 1.4 CITY 2.1 HILL 2.2 NAME 2.3 STREE 2.4 CITY 3.1 HILL 3.2 NAME 3.2 NAME	I ADDRESS  T ADDRESS	urad when constating)	CERS AND DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL 3 STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL 3 VD GAINES, STELL	A D.  Drive	is of, Section 607.0505, Flor  their trapplicable (NOTE  RECTORS  DELETE	Hagistrical Activities  13. 13. 13. HILLE 12 NAME 1.3 STREE 2 NAME 2 STREE 2 4 COLY 3 THEE 32 NAME 3.3 STREE 3.4 COLY 3.4 COLY 3.4 COLY 3.5 STREE 3.4 COLY 3.7 STREE 3.4 COLY 3.7 STREE 3.4 COLY 3.7 STREE 3.4 COLY 3.7 STREE	I ADDRESS  I ADDRESS  I ADDRESS  I ADDRESS  I ADDRESS	urad when constating)	CERS AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
AGONT. I E SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	is of, Section 607.0505, Flor their Englicable (NOTE RECTORS DEFETE DEFETE	Projective Augustruct	I ADDRESS S1-ZIP  I ADDRESS S1-ZIP  I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change	RS IN 12 Addition Addition
AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	is of, Section 607.0505, Flor  their trapplicable (NOTE  RECTORS  DELETE	Projective Active Project Proj	I ADDRESS S1-ZIP  I ADDRESS S1-ZIP  I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	is of, Section 607.0505, Flor  their trapplicable (NOTE  RECTORS  DELETE	Projective Active Project Proj	I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
AGONT. I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	is of, Section 607.0505, Flor  their trapplicable (NOTE  RECTORS  DELETE	Hagistried Ac   Hagistried Ac   13   1.1   11   11   12   13   14   12   14   13   14   14   17   17   18   18   18   18   18   18	I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change	RS IN 12 Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	s of, Section 607,0505, Flor  discrit applicable (NOTE  RECTORS  DELETE  DELETE	Pagistrical Activation   Pagistrical Activat	I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	s of, Section 607,0505, Flor  discrit applicable (NOTE  RECTORS  DELETE  DELETE	Project   Proj	I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	s of, Section 607,0505, Flor  discrit applicable (NOTE  RECTORS  DELETE  DELETE	Figure 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change Change Change	RS IN 12 Addition Addition Addition Addition Addition
AGONT. I E SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	s of, Section 607,0505, Flor  their trapplicable (NOTE  RECTORS   DEFETE  DETETE  DETETE	Project   Proj	I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PO GAINES, DAVIS 1405 DOLIVE D ORLANDO FL S STD GAINES, J. PEI 1405 DOLIVE D ORLANDO FL S VD GAINES, STELL 1405 DOLIVE D	A D.  Drive	s of, Section 607,0505, Flor  their trapplicable (NOTE  RECTORS   DEFETE  DETETE  DETETE	Tagistrical Ac   Tagi	I ADDRESS S1-ZIP	urad when constating)	CERS AND DIRECTOR Change Change Change Change	RS IN 12 Addition Addition Addition Addition Addition

earning or supplied region is true and accurate and that my signature shall have the same legal effect as if made under or ration or the receiver or trustee expowered to execute this report as required by Chapter 607, Florida Statutes, and that my name langed, or organ attachment within address.

\*\*The state of the same legal effect as if made under organized by Chapter 607, Florida Statutes, and that my name langed, or organ attachment within address.

\*\*The state of the same legal effect as if made under organized by Chapter 607, Florida Statutes, and that my name langed, or organized by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and that my name langed by Chapter 607, Florida Statutes, and the first florida Statutes, and the florid