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 # J08479

(4)

NORRIS, KOBERLEIN & ANDERSON, P.A.

FILED										
Jan 27 1997 8:00am										
Secretary of State										

Principal Place	o of Business	Ma	Mailing Address						DIRII BIRII BIRII BI		// IAN IAN	
201 NORTH MARION STREET. SUITE 301 POST OFFICE DRAWER 2349 LAKE CITY FL 32056-2349			201 NORTH MARION STREET. SUITE 301 POST OFFICE DRAWER 2349 LAKE CITY FL 32056-2349									
US		U\$						3. Date Incorporated or Qualified	3a. Date of		3port	
2 Principal P	ace of Business	2a	Mailing Address					04/30/1986 4. FEI Number	03/05/1		plied For	
21			26					59 17 Not Applica				
Suite, Apt #, etc			Suite, Apt. #, etc.						\$8		Additional	
22			27					5. Certi. ate of Status Desired	1 1 7	ee Re		
City & State			City & State				.,	6. Election Campaign Financing \$5.00 May Be				
23			28					Trust Fund Contribution Added to Fees				
Zip	Country	<u> </u>	Zip		ountry	'		8. This corporation has liability for intangible tax under s. 1			199.032,	
24	25 9. Name and Address of Curre	29		30	30			Fiorida Statutes Yes No 10. Name and Address of New Registered Agent				
		iii negisi	tereo Agent		81	Name		10. Maine and Address of New Ne	Aretaled whole			
	RIS, JOHN E.	F 004								····		
201 NORTH MARION STREET SUITE 30 LAKE CITY FL 32055			1 82 Stree			Stree	t Addre	fress (P.O. Box Number is Not Acceptable)				
LAN	: CIT FL 32000				83							
\										r		
					84	City			FL 85	Zip (Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 60	07.1508, Florida Statu	tes the	above	e-name	d corp	oration submits this statement for the p	urpose of char	ging it	s registered	
	egistered agent, or both, in the Stat m famil ar with, and accept the obli						rporati	on's board of directors. I hereby accep	ot the appointm	ent as	registered	
SIGNATURE												
	Signature, typed or protod name of registrates as	*****				erit signatu	re require	d when reinstating)	DATE			
12.	OFFICERS AT	ND DIREC	DELETE	13				ADDITIONS/CHANGES TO OFFIC		hange	S IN 12	
TITLE	PD		L] DELETE		TITLE		1		۰	lanye	TTI VOOITION	
NAME OTOUGH A DIGNOGO	NORRIS, JOHN E.				2 NAME 2 CYPETY	**********						
STREET ADDRESS	201 N. MARION ST. #301					ADDRESS	`					
CITY - ST - 7IP	LAKE CITY FL SD		DELETE		I CITY - S	1 - ZIP			П	hange	Addition	
NAME	KOBERLEIN, FREDERICK L.				2 NAME							
STREET ADDRESS	201 N. MARION ST. #301					ADDRESS	. [
CITY-S1-ZIP	LAKE CITY FL			1	4 DITY - :							
TILE	<u>= , </u>		DELETE		TITLE		1			hange	Addition	
NAME				32	2 NAME							
STREET ADDRESS				3.3	3 STREET	ADDRESS	:					
CITY-ST-7P					4. CITY -	ST-ZIP	<u> </u>					
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NAME				- E	2 NAME							
STREET ADDRESS						ADORESS	;					
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STREET ADDRESS CHY-ST-7P						ADDRESS	'					
TITLE			☐ DELETE		4 CITY-S 1 TITLE	01-21P	+		[]	hange	Addition	
NAMÉ					2 NAME							
STREET ADDRESS						ADORESS	,					
1							1					

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 changed, or on an attachment with an address.

SIGNATURE:

IRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

John E. Norris, President

1/15/97 904/752-7240

Daylime Phone #