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

NIMENT #

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	e of Busines JANNEY AD ROAD	OUN	IGE AND RE	STAUF	Mailing Address % DONALD L. JANNEY 1241 HOMESTEAD ROAD LEHIGH ACRES FL 33936-6003						3. Date Incorporated or Qualified 3a. Date of Last Report			
											3. Date Incorporated or Qualified 08/19/1986		ate of Last F 26/1996	Report
2. Principal P	lace of Busin		2	2a, Mailing Address						4. FEI Number			oplied For	
21			26	26						59-2691680		N	ot Applicable	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc						5. Certificate of Status Desired			Additional equired		
City & State	e			- 127	City & State						6. Election Campaign Financing			May Be
23		28	28						Trust Fund Contribution			to Fees		
Zip	ip Country				Zip			Country			8. This corporation has liability fo	r intangible	tax under s	. 199.032,
24	25				29 30									
4441	Address of Curr	eni Reg	stered	Agent			10, Name and Address of New Reg				Agent			
JANI	VEY, DONA					6,	INATIL	3						
1241 HOMESTEAD ROAD									Street	Addre	ess (P.O. Box Number is Not Accepte	able)		
LEHIGH ACRES FL 33936													· · · · · · · · · · · · · · · · · · ·	
							City			FL	85 Zip	Code		
11. Pursuant	to the provis	ions o	Sections 607.0	502 and	607.15	08, Florida Statu	ites. 1	he abov	e-name	d corpo	oration submits this statement for the	purpose of	changing i	ts registered
office or r agent. I a	egistered ag m familiar w	jent, d ith, ar	or both, in the Sta ad accept the obt	te of Flo galions	rida. Si of, Sec	iich change was tion 607.0505, F	autho Iorida	orized by Statute:	y the co s.	rporatio	oration submits this statement for the on's board of directors. I hereby according	ept the app	ointment as	registered
SIGNATURE														
12	Signature, typed	or prio	OFFICERS A				H: Reg		nrt signatu	re require	ed when re-instating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTO	DC IAI 12
12.	PD		OF ICERS A	אונז נזאנ	CION	DELETE		13.		Τ	ADDITIONS/CHANGES TO OFF	ICERS AINL	Change	Addition
NAME	JANNEY,	DON	ALD L.				ı	1.2 NAME					Onlings	
STREET ADDRESS	4444464509545.55				l			1.3 STREET ADDRESS		1				
CITY-ST-ZIP	LEUIOU AODEC EL								14 CITY - ST - 7/P					
TITLE	SD					DELETE		2.1 TITLE		1			Change	Addition
NAME	JANNEY,							2.2 NAME						
STREET ADDRESS	1241 HOI								23STREET ADDRESS					
CITY-ST-ZIP	LEHIGH A	\CRE	S FL					2 4 CHY-	S1 - ZIP					
TITLE	VD					DELETE	1	3.1 TITLE					Change	Addition
NAME	JANNEY,						ļ	3.2 NAME		-				
Street address			EAD ROAD				ŀ	3.3 \$TREE1	ADDRESS					
CITY-ST-ZIP	LEHIGH A	WHE	S FL			Deter		3.4. CITY-	\$T - 7IP				T 05-000	
TITLE						L DELETE		4.1 TITLE					L Change	☐ Addition
NAME OXOGET ADDRESS								4. 2 NAME	LEIDAGAA	1				
STREET ADDRESS							1	4.3 \$1REE1		1				}
CITY-ST-ZIP TITLE	 -					DELETE		4.4 CITY - S 5.1 TITLE	51 - ZIF'	+			Change	Addition
NAME	}						- 1	5.2 NAME		1			Viluiig0	
STREET ADDRESS								5.3 STREET	ADDRESS	1				
CITY-ST-ZIP								5 4 CHY-9		1				
TITLE						DELETE	_	6170718		1			Change	Addition
NAME							J	6.2 NAME						
STREET ADDRESS			6.3 STR			6.3 STREE	ADDRESS	1						
l	i									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 if changed, or on an attachment with an address.

FILED

May 14 1997 8:00am

Secretary of State