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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J48703

(9)

DESIGN MANAGEMENT, INC.

FILED
Apr 09 1997 8:00am
Secretary of State



Principa' Place of Bus	iness	Mailing Address				t 198(tift anti esas iditt iditt ditta ant aidtt arbit artit antit antit antit antit bant			
10031 OAKS LANE SEMINOLE FL 34642-2006		10031 OAKS LANE SEMINOLE FL 3377	10031 OAKS LANE SEMINOLE FL 33772-2006						
						Date Incorporated or Qualified 12/19/1986		ate of Last I	Report
2. Principal Place of E	Business	2a. Mailing Addre	SS			4. FEI Number	1		pplied For
21		26			59-2762368			lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, e	etc.			5. Certificate of Status Desired			Additional
22		27	·····						lequired
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23	Country	Zip		ountry	······································		intensible		
24	25	29	30	J. 1.1. y		8. This corporation has liability for Florida Statutes		No	B. 199.032,
	ame and Address of Curre]30]	T		10. Name and Address of New Ro			
DICKEY, WIL		······································		81	Name				
2310 W. BA		82 Stre			ess (P.O. Box Number is Not Accepta	nio\	 		
LARGO FL 3				02	Stieet Audi	ess (F.O. Box Number is Not Accepta	ul o)		
				83					
				84	City			les l Zin	Code
				04	City	! '	FL	85 Zip	Code
12.	typed or printed run viol registered a OFFICERS A	agent and title Lapphoable. ND DIRECTORS	(NOTE: Register		iuper erutangia Ins	ed when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTO	RS IN 12
nue PST	CITION	DEL		TITLE	······	7,557,64,64,64,64,64		☐ Change	Addition
	sko, robert G.		1.2	NAME	Ì				
	OAKS LANE		1.3	STREET	ADDRESS				
	IOLE FL			CITY-S	T-ZIP			——————————————————————————————————————	T 11
TITLE D	OVA DABERT A	☐ DEL		TITLE	ļ ·			Change	Addition
	SKO, ROBERT G. OAKS LANE			NAME	ADDRESS				
L L	OAKS DAVE NOLE FL		1	SIREET	ADDRESS				
TOLE		DEL		TITLE	31.511			Change	Addition
NAME		•		NAME				Í	
STREET ADORESS			3.3	STREET	ADDRESS	,			
City - St - 7th				CITY-S	ST-ZIP				
TETLE		t DEL	ETE 4.1	TITLE				Change	Addition
NAME			4.2	NAME	Ì				
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-SI-7IP				CITY-S	T-ZIP		· · · · · · · · · · · · · · · · · · ·	Chanca	Andii
TITLE		☐ DEL		TITLE				Change	Addition
NAMÉ PADECI ADDIGUE				NAMÉ OTRCET	ADODECC				
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIF		☐ DEL		CITY - S	1 - ZIP			Change	Addition
NAME		<u>_</u>		NAME				- Similar	1.000(10)
STREET ADDRESS			1		ADDRESS				
City-St-ZP				CITY-S					

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 and cated 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 trusted 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.

SIGNATURE:

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