FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

BURROWS & JESTER, P.A.

FILED Mar 26 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address				7	- 1 14011110 11111 DYDAK 10110 1010¥ 1100\$ 11111 01011 11011 11011 01011 01011 01011 01011 01011 01011					
	URROWS RRITT ISLAND CAUSEWAY. SUITE 307 AND FL 32952	% TOM G. BURROWS PO BOX 541196 MERRITT ISLAND FL 32954-1196 US				DO	O NOT WRITE	F IN THIS S	SPACE			
US	NAO FE 32302				3. Date Incorporated or Qualified							
						12/19/1986						
2, Principal Pl	ace of Business	2a. Mailing Address			4. F	4. FEI Number Applied For						
21 775 E	AST MERRITT 731. CHEEN	26				59-2744199				t Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				-	Certificate of Statu	o Donirod		\$8.75	Additional	
22 ut 32		27				B. (Cermicate of Statu	s Desired		Fee Re	popula	
City & State		City & State			6 , E	Election Campaign	Financing		\$5.00	May Be		
	T ISLAUD, FL	28				1	Trust Fund Contrib	ution		Added	lo Fees	
Zip	Country	Ziρ		untry			This corporation ov	-	_			
24 3295		29	30	т —			Personal Property] No	
	9. Name and Address of Current	nagistered Agent		81	Name	10.	Name and Addres	S OI NOW N	agistered A	rgent .		
BURROWS, TOM G.					- Indilio							
	EAST MERRITT ISLAND CAUSEN	AY		82			O. Box Number is			AUSEW	44	
4	ITE 307			83	//3 E		MERRITT	+ 7 IVV	W C	1030 a	77.7	
WIL	RRITT ISLAND FL 32952			~	SUITE	3	20					
				84	City	1	ISIANI	`	EI	85 Zip	Code	
11 Dureupht	to the provisions of Sections 607.0502	and 607 1508 Florida State	doe the o	hove	MERR				FL number of		952	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligat	Florida Such change was	authorize	d by 1	the corporat	tion's bo	oard of directors.	hereby acce	pt the appo	ointment as	registered	
	m familiar with, and accept the obligat	ions of, Section 607.0505, F	lorida Sta	itutes.							- 1	
SIGNATURE	Signature, typed or printed name of registered agent	and lith of southeaddy (NC)	ITF Bagistare	d Ageni	signature requi	red when re	einstation)		DATE			
12.	OFFICERS AND		13.		o grand rodge		DDITIONS/CHANG	ES TO OFFI		DIRECTOR	IS IN 12	
TITLE	PD	☐ DELETE	1.1 T	ITLE						Change	Addition	
NAME	BURROWS, TOM G.		1.2 N	IAME				_		•		
STREET ADDRESS	15 E. MERRITT ISLAND #307		1.3 \$	TREET A	DDRESS 77	5E.	MERRIT I	SAND	#32 <i>C</i>	•		
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 C	ITY-ST-		-	•				- 1	
TITLE	DVS	☐ DELETE	2.1 T	ITLE						Change	☐ Addition	
NAME	Jester, Jerry L.		2.2 N	IAME								
STREET ADDRESS	15 E. MERRITT ISLAND #307		2.3 S	TREET A	DORESS 7	75 F	MERRIT	TSIAN) #32	w	l	
CITY-SY-ZIP	MERRITT ISLAND FL		2.40	CITY-ST		, –					ı	
TITLE		DELETE	3.1 T	ITLE						Change	Addition	
NAME			3.2 N	AME								
STREET ADDRESS			3.3 S	TREET A	ODRESS							
CITY-ST-ZIP			34.0	CITY-ST	-ZIP							
TITLE		☐ DELETE	4.1 T	ITLE						Change	Addition	
NAME			4.21	NAME	1						ļ	
STREET ADDRESS			4.3 \$	TREET A	DORESS							
CITY-ST-ZIP			4.4 C	ITY-ST-	ZIP							
TITLE		☐ DELETE	5.1 7	ITLE						Change	Addition	
NAME			5.2 N	IAME								
STREET ADDRESS			5.3 S	TREET A	DDRESS							
CITY-S1-2IP		· · · · · · · · · · · · · · · · · · ·	5.4 C	ITY-ST-	ZIP							
TITLE		DELETE	6.1 T	ITLE	1 -					☐ Change	Addition	
NAME			6.2 N	IAME								
STREET ADORESS			6.3 S	TREET A	DORESS						ł	
CITY+ST-ZIP				ITY-ST-								
14. I hereby o	ertify that the information opplied with	this filing does not qualify	for the ex	empti	on stated in	Section	119.07(3)(i), Flori	da Statutes.	I further cer	rtify that the	information	

indicated on this annual report or purplemental 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 of the receiver or trusted enjoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, in on an attachment with fun address. , Vice Pus

SIGNATURE:

3-23-98 407-453-2190