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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1997	DIVISION OF	CORPORATIONS	Secret	ary or State	
	MENT # J54					
Principal Plac	e of Business	Mailing Address				
2707 W HWY 44		P.O. BOX 650				
EUSTIS FL 32726 US		TAVERES FL 32778-0650 US	l			
}				3. Date Incorporated or Qualif	1	
2 Principal P	lace of Business	2a. Mailing Address		01/29/1987 4. FEI Number	07/24/1996 Applied For	
21	Idee of Frankess	26		59-2781559	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & Stat	6	City & State		Election Campaign Financir	Fee Required \$5.00 May Be	
23	*	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	,	for intangible tax under s. 199.032,	
24	9. Name and Address	29 29 of Current Registered Agent	30	Florida Statutes 10. Name and Address of Nev	Yes No WRegistered Agent	
SAN	IFORD, BRUCE		81 Name	· /	· 5	
2702 W HWY 44			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
EUSTIS FL 32726			83	707 W. Hwy	74	
				· · · · · · · · · · · · · · · · · · ·		
}			84 City E	WS17S	FL 85 32726	
11. Pursuant	to the provisions of Section	is 607.0502 and 607.1508, Florida State	utes, the above-named cor	poration submits this statement for	the purpose of changing its registered coept the appointment as registered	
agent La	egistered agent, virtoan, in im familiar with, alid accept	the obligations of Section 607.0505, F	arida Statutes.	yion's board of directors. I flereby a	1/21-97	
SIGNATURE	Signature, typed or partied hans of	gistered agent and file if applicable (NO	OTE: Registered Agent signature requ	l/red when reinstating)	DATE	
12.		ICERS AND DIRECTORS	13,		PFFICERS AND DIRECTORS IN 12	
THEF	D	DELETE	1.1 TITLE		Change Addition	
NAME	SANFORD, BRUCE 2434 FIRWAY AVE		12 NAME		ļ	
STREET ADDRESS CITY-ST ZIP	EUSTIS FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
HILE	PSTD	DELETE	2.1 TITLE		Change Addition	
NAME	NACKE, GREGORY	_	2.2 NAME			
STREET ADDRESS	19425 SPRING OAK I	DR .	2.3 STREET ADDRESS			
CITY-ST ZIP	EUSTIS FL	DELETE	2.4 CITY-SY-ZIP 3.1 YITLE		Change Addition	
NAME			3.2 NAME	4		
STREET ADDRESS			3.3 STREET ADDRESS			
City-St Zir	,	- DELETE	3 4. City-ST-ZIP		Chara Chara	
MILE NAME		☐ DELETE	4.1 TITLE 4.2 NAME		Change Addition	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST. 7IP			4.4 CITY-ST-ZIP			
सार्र		☐ DELETE	5 1 TITLE		Change Addition	
NAME former to approximate			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS 5.4 City - St - Zip			
Dity SI-7/P		☐ DELETE	61 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	}		6.3 STREET ADDRESS			
1	I		0.000.07.70			

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 challed or on an attachment with an address.

SIGNATURE:

Apr 09 1997 8:00am