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

PROFIT CORPORATION



COF ANNU	PROFIT RPORATION JAL REPORT	FLORIDA DEPART Sandra B. Secretary	Mortham of State		1997 8:00am ary of State
DOCUI	1997 MENT # J6409 (DIVISION OF CO	PRPORATIONS	Score	ary or state
	UORS, INC.				
Principal Place of Business 1700 PERIWINKLE WAY UNIT 6 SANIBEL FL 33957		Mailing Address 15510 SHELL PT BLYD UNIT 6 FT MYERS FL 33908-1653			
				 Date Incorporated or Qualified 03/23/1987 	3a. Date of Last Report 03/26/1996
·····	face of Business	2a, Mailing Address 26 1700 PER 11	MIN)VISI	4. FEI Number 59-2781435	Applied For
21 Suite, Apt. 22	#, elc	Suite, Apt. #, etc.	will the w	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State SAN BE	L FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 ₁₂ 200	Country	8. This corporation has liability for	r intangible tax under s 199.032,
24	25 9. Name and Address of Curr		0	Florida Statutes 10. Name and Address of New R	Yes No egistered Agent
	MIDT, PATRICIA RUTH		81 Name -	JOHN ENGLISH	}
15510 SHELL POINT BLVD FT. MYERS FL 33908				ddress (B.O. Box Number is Not Accepte	394
			83	<u> </u>	
			84 City	ANLIBEL	FL 85 Zin Code 57
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	thorized by the corpo	corporation submits this statement for the	purpose of changing its registered
agent La SIGNATURE	It he sono	Sest	da Statutes. Registered Agent signature re	oration's board of directors. I hereby acci	4-3-97
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	PST SCHMIDT, PATRICIA RUTH	DELETE	1.1 TITLE	SPERGTALY - TREASURE	Change X Addition
NAME STREET ADDRESS CHTY-ST-ZIP	15510 SHELL POINT BLVD FT. MYERS FL		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	1700 PERIWINGLE SANIBEL FL	WAY 8
TITLE NAME	D SCHMIDT, PATRICIA RUTH	X DELÉTE		PRESIDENT ELIZABETH ENGI	Change Addition
STREET ADDRESS C:TY-ST-7IP	15510 SHELL POINT BLVD FT. MYERS FL		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP	1700 PERIWINKI	3957
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CHY-SI-7IP			3.4. CITY-6T-ZIP		·
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADORESS			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
THE	,	DELETE	5.1 TITLE		Change Addition
NAME.			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		- otter	6.2 NAME		Colonido Fill Ministry
STREET ADORESS			6.3 STREET ADDRESS		
CHTY - S1 - Z) ²) (10 A) (10 A)	64 CITY-ST-ZIP	400000	
informatio	or indicated on this annual report of	or supplemental annual report is tru	e and accurate and t	ated in Section 119.07(3)(i), Florida Statut that my signature shall have the same leg port as required by Chapter 607, Florida	gal effect as if made under path; that

FILED