FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FEORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J66791

(1)

LESHER, WARD & ASSOCIATES, INC.

96 APR 10 PM 12: 46
SECRETARY UF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

1555 PALM SUITE 1000		SUITE 1000	1555 PALM BEACH LAKES BLVD. SUITE 1000						
WEST PALM BEACH FL 33401		WEST PALM BEACH FL 33401		3. Date Incorporated or Qualified 04/14/1987	04/19/1995				
h	Place of Business	2a. Mailing Address			4. FEI Number Applied For				
21 Suite Act						59-2802534 Not Applicable			
22	#, cto.	Suite, Apt. #, etc. 27			5. Certificate of Status Desired See Required				
City & Sta	te	City & State			Election Campaign Financing \$5.00 May Be				
23		[28]			Trust Fund Contribution Added to Fees				
Zip [24]	Country 25	Ζιρ [29]	Zip Country			No. Corporation has liability for intangible tax under s. 199.032, Florida Statutes			
<u> </u>	9. Name and Address of Curren					10. Name and Address of New Registered Agent			
			8	31	Name	The state of the s			······································
LESHER, GERALD S.				32	2 Street Address (P.O. Box Number is Not Acceptable)				
1555 P	ALM BEACH LAKES BLVD.					THE PROPERTY OF THE PROPERTY O			
SUITE			83						
WEST	PALM BEACH FL 33401		Ĩ	34	City		F	85 Zij	p Code
l or registe	I to the provisions of Sections 607.0502 ered agent, or both, in the State of Floric with, and accept the obligations of, Sect	ta. Such change was authoriz	zed by the co	e-na orpo	amed corporation's boar	ation submits this statement for the prid of directors. I hereby accept the ap	aurance of c	hanning ite r	egistered office agent. I am
SIGNATURE.		and the second s	estine Times						
Skynature: spood or printed name of registered agent and title if applicable: 12. OFFICERS AND DIRECTORS			NOTE: Registered Agent signature records 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TIFLE	DP	DELETE	1. 1 T(I)	 LE	[·····	☐ Change ☐ Addition			
NAME	LESHER, GERALD S.	1.2 NAM			· -				
STREET ADDRESS			1.3 STREET ADDRESS		ADDRESS	100001775891			
CITY-ST-ZiP	WEST PALM BEACH FL		1.4 CITY- St		ZIF	-04/11/9601012006			
TITLE	DVP			2 1 TITLE		****638.75□*****290*******************************			
NAME	WARD, PHILIP H. III		2.2 NAME						
STREET ADDRESS	***************************************		2.3 STREET ADDRESS		ADDRESS				
CITY+ST-ZIP	JUPITER FL	24 CI'Y		- ZIP	F1 A				
TITLF	DS DAMES A CONTRACT	DELETE	3 1 TITLE					Change	☐ Addition
NAME	DAMON, CONRAD	•	3.2 NAME 3.3 STREET ADDRESS						i
SEREET ADDRESS	1555 PALM BCH LAKES BLVD W PALM BCH FL								
CITY-ST-ZIP TITLE	W PALM DOTI FL			3.4.CITY-S1-7/P				Change	Addition
NAME				2 NAME				Grisings	□ vaovion
STHEET ADDRESS					ADDRESS				
CITY-ST-ZIP			4 4 C/TY			(1) A			
THEF	<u> </u>			TITLE		~ MUIN		Change	Addition
NAMŧ			5.2 NAM	15		Do1.			-
STREE! ADDRESS			£ 3 S FRE	EET A	ADDRESS	4			
CITY-S1-ZIP	I		5 4 CILY	′-SI	- 71E				
TITLE		☐ DELETE	6 1 TITLE					☐ Change	☐ Addit-on
NAME			6 2 NAM	Ĺ					
STREET ADDRESS			6.3 S1R5	H.	ADDRESS				
CITY-ST-ZIP			6.4 CHTY	· \$1	- ZIP				

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual ground 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 disease of the corporation of the resolution of the corporation of the resolution of the res

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SUMING OFFICER OR DIRECTOR

8/26/96 407-689-8111