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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # J70294

(0)

| Principal Place of Business Mailing Address 2325 ULMERTON ROAD SUITE 16 CLEARWATER FL 34622 Mailing Address CLEARWATER FL 34622 | | | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report | | | |
|---|---|-------------------------------|-------------------------|-----------|---------------------|--|------------------------|-----------------|-------------------------------|
| US | | U\$ | | | | 05/01/1987 | | 05/01/19 | |
| 2. Principal Plac | ce of Business | 2a. Mailing Addre | ess | | · | 4. FEI Number 59-2798288 | | | Applied For Not Applicable |
| Suite, Apt. #, | , etc. | Surte, Apt. #, | etc. | | | | | \$8.75 | Additional Required |
| City & State | v | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | 0 May Be d to Fees |
| Zip | Country | Ζιρ [29] | Gount 30 | ry | | This corporation has liability for infinity Florida Statutes | | | |
| 4 | 9 Name and Address of Cur | | | | | 10. Name and Address of New Re | | l Agent | |
| | 5. 100.00 0.00 | | 8 | ĭĺ | Name | | | | |
| DIAMANDIS, JOHN T. 101 E. KENNEDY BOULEVARD | | | | | Street Addr | s (P.O. Box Number is Not Acceptable) | | | |
| SUITE 2 | | | 8 | 3 | | | | | |
| | FL 33602 | | i. | 4 | City | | | 85 Zi | p Code |
| | | | - | 1 | * | ration submits this statement for the purp | F | L. | · |
| SIGNATURE | Signature, Typed or printed name of registered a OFFICERS | genta cheer ageicals. | (NO71 Pegidered A | g-41id | l signature require | ADDITIONS/CHANGES TO OFFIC | OATE FRS AN | | |
| TITLE | PD | DELE | TE 1 1 I I I I | F | .,, | | | Change | Addit-on |
| IAME | CHAPMAN, STEVEN | | 1.2 NAM | £ | | | | | |
| STREET ADDRESS | 2325 ULMERTON ROAD, | SUITE 16 | | | ADDRESS | | | | |
| CITY - ST - ZIP | CLEARWATER FL | DELI | 140:17 | _ | 1 - ZIP | | | Change | ☐ Addition |
| IITLE | CST DUPONT, THOMAS L. | □ bro | ETE 2.1 THTL 2.2 NAM | | | | | Onlinge | |
| NAME | 2325 ULMERTON ROA,D | SUITE 16 | | | ADDRESS | | | | |
| STREET ADDRESS | CLEARWATER FL | OGITE 10 | 24 011 | | | | | | |
| CITY-ST-ZIP T:TLE | D | DEL! | | | | | | Change | ncitibbA 🔲 |
| NAME | DUPONT, THOMAS L. | | 3.2 NAM | · | | | | | |
| STREET ADDRESS | 2325 ULMERTON ROAD, | SUITE 16 | 3.3 SIF | E E I | I ADURESS | | | | |
| CITY - S1 - 7IP | CLEARWATER FL | | 3.4 C/D | - S | T - Z'P | | | | |
| TITLE | | ☐ DEL | ETE 4 1 TITI | _E. | | | | Change | Addition |
| NAME | | | 4.2 NAM | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY - ST - ZIP | | | 4.4 C(1) | | ST - ZIP | | | Change | ☐ Addition |
| TATLE | | □ D£L | | | | | | <u>П</u> спанде | ☐ vacarrol. |
| NAME | | | 5.2 NAA | | LANGOGO | | | | |
| STREET ADDRESS | | | | | LADDRESS | | | | |
| CITY - ST - ZIP | | DEL | 54 CIT | | 51 - 211' | | | Change | Addition |
| TITLE | | | 62 NAM | | | | | | |
| NAME CTOCCT ADODGES | | | | | LADDRESS | | | | |
| STREET ADORESS CITY-ST-ZIF | | | 6 4 CII | | | | | | |
| MA Labarah | codify that the information suppl | had with this filma is valual | Larily furnished and c | oe loe | es not qualify | for the exemption stated in Section 119.0 |)7(3)(k), [[] | Florida Stati | ites. I further |

red freely 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 changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR SHOELB Shook

8(3-57) 9779 Days mir Phone #