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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J77553

(2)

Mailing Address

STOTTLER STARMER TECHNOLOGIES, INC.

F	ILED	
May 02	1997	8:00am
Secret	ary of	State

Daytime Prione #

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% RICHARD H. STOTTLER. JR. 8680 N ATLANTIC AVENUE CAPE CANAVERAL FL 32920		% RICHARD H. STOTTLER. 8680 N ATLANTIC AVENUE CAPE CANAVERAL FL 3282							
			AND PARTERIAN APPROPRIATE		3. Date Incorporated or Qualified 06/15/1987		3a. Date of Last Report 04/24/1996		
	Place of Business	2a. Mailing Address		4, FEI		:		plied For	
21		26	: +1·4 + -1·14	59	2869189			t Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Cert	ificate of Status Desired	X	\$8.75 A		
22 Car & Cros		City & State	<del> </del>				Fee Re	<del></del>	
City & Stat	C	28			tion Campaign Financing t Fund Contribution		\$5.00 Added to		
<b>23</b>	Country	Z(p)	Country		corporation has liability for			<del></del>	
24	25	29	30	. 4 .		Yes		189.032,	
<u></u>	9. Name and Address of Curre		130		ne and Address of New Re			,	
STO'	TTLER, RICHARD H., JR.	· · · · · · · · · · · · · · · · · · ·	81 Name			·····	<u> </u>	******	
	N. ATLANTIC AVENUE	•	82 Street Ad	delegan (D.O. D	iox Number is Not Acceptab				
	E CANAVERAL FL 32920		62 Street Ad	adress (P.O. E	ox Number is Not Acceptat	ые)	•		
Ora	E CHRITEINE I C COCC		83						
							<del>, , ,</del>	<del></del>	
		1	84 City		•	EI	85 Zip 0	2ode	
11. Parsuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statut	es, the above-named co	orporation sub	mits this statement for the c	ourpose of c	LL :hanging it:	s registered	
office or i	registered agent, or both, in the Stat	e of Florida. Such change was a	authorized by the coroo	ration's board	of directors. I hereby accept	pt the appoi	ntment as	registered	
agent. La	irr familiar with, and accept the obliq	gations of, Section 607.0505, Fit	onda Statutes.	41 4					
SIGNATURE	Signal veil type of or printed name of registered as	Sant and title if another shape (NOT)	E: Registered Agent signature re	o ired when relacts	·	DATE	······································		
12.		ND DIRECTORS	13.		TIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12	
TITLE	PD	DELETE	1.1 TITLE	<del></del>			Change	Addition	
MAME.	STOTTLER, RICHARD H. JR.		1.2 NAME						
STREET ADDRESS	8680 N ATLANTIC AVENUE		1.3 STREET ADDRESS						
	CAPE CANAVERAL FL		1.4 City-St-ZiP						
CHY+SI+ZIF TITLE	SD	DELETE	2.1 TITLE	<del></del>		r	Change	Addition	
NAME	DEEVERS, JUDITH C.		2.2 NAME	.3	*	_		<del></del>	
STREET ADDRESS	8680 N ATLANTIC AVENUE		2.3 STREET ADDRESS		1. 1				
City SI-7IP	CAPE CANAVERAL FL		2. 4 CITY-ST-ZiP	No.				•	
Tilté Litt : 51-71F	VO	DELETE	3,1 TIFLE		······································	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	MCLOUTH, MALCOLM E.	~~~~	3.2 NAME	• .	•	-			
STREET ADDRESS	8680 N ATLANTIC AVENUE		3.3 STREET ADDRESS						
E/TY+\$1-ZiP	CAPE CANAVERAL FL		3.4. CITY-ST-ZIP						
][[][		DELETE	4.1 TITLE	<del>.</del>	<del></del>		Change	Addition	
NAME			4. 2 NAME			_			
STREET ADDRESS			4.3 STREET ADDRESS	*			,		
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NAME			5.2 NAME			_			
			5.3 STREFT ADDRESS						
STREET ADDRESS			1	:					
CITY+S - ZIP	<u> </u>	DELETE	5.4 CITY-ST-ZIP 6.1 TIFLE	·		r	Change	Addition	
THILE		☐ percit	6.2 NAME	•				,	
NAME			ı i						
STREET ADDRESS			6.3 STREET ADORESS						
CITY - ST - ZIP	by certify that the information suppli	ad with this filling does not	6.4 CITY-ST-ZIP	itad in Casties	110 07/2)(i) Elecide Ctet de	e I fuelbor	cortifu that	the	
information Larrian d	roy certify that the information suppirent or directed on this annual report or officer or director of the corporation on Block 12 or Block 13 if changed,	supplemental annual report is to the receiver or trustee empow	rue and accurate and the vered to execute this rep	hat my signati	ire shall have the same lega	al effect as i	if made und	der oath; tha	