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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # J84264

(7)

## **FILED** May 14 1997 8:00am Secretary of State

Principal Plac		Mailing Address 1131 VILAS AVE.			
1131 VILAS AVI SARASOTA FL		SARASOTA FL 34237-2933			
				3. Date Incorporated or Qualified 07/21/1987	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 2a. Mailing Address			ام ا	4. FEI Number	Applied For
21 2 Sulte, Apt. #, etc.		26 283 Interstate Ct. Suito, Apt. #, etc.		59-2830162	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Sarasota 1	EL		Added to Fees
Zip	Country		Country	8. This corporation has liability for in	
24	25 25 Course	29 34240 30		Florida Statutes  10. Name and Address of New Regi	Yes No
9. Name and Address of Current Registered Agent NIXON, JAMES M., II				10. Name and Address of New Regi	stereo Agent
1400 4TH AVE. WEST			81 Name		
	DENTON FL 33505		82 Street Ad	dress (P.O. Box Number is Not Acceptable	)
			83		
			<b>84</b> City		85 Zip Code
			,		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature typed or printed name of registered age	and and tibe if applicable (NC1E: Regis	stered Agent signature rea	uu≇ed when reurstating)	DATE
12.	OFFICERS AND	D DIRECTORS 1	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DILETE 1	LI TOLE		Change Addition
NAME	BALLARD, DILLARD V.		I.P NAME	بلامالي بمستعمم	15
STREET ADDRESS	1131 VILAS AVE. SARASOTA FL		1.3 STREET ADDRESS	283 Interstate Ct. Samusota FL 3424	ا ا
CITY-ST-ZIP	D		1 4 C·TY - S1 - ZIP	samesota pe 3424	Change Addition
NAME	BRIMER, ROBERT D.	<del></del>	2 NAME		
STREET ADDRESS	2854 48TH WAY E	2	2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		2. 4 CITY- ST-ZIP		
TITLE	D DOMEST DOMEST	_	1.1 TITLE		Change Addition
NAME	BRIMER, DONALD G. 2854 48TH WAY E		3.2 NAME		
STREET ADDRESS	BRADENTON FL		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D		3 4. CITY- S1 - ZIP		Change Addition
NAME	BALLARD, MELISSA A.	4	1. 2 NAME		
STREET ADDRESS	1131 VILAS AVE.	4	3 STREET ADDRESS	183 Fatorstate Ct.	
CITY-ST-ZIP	SARASOTA FL		14 CITY-ST-ZIP	Sarasota FL 34240	Trong and the same
TITLE		· ·	i 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			2 NAME		
STREET ADDRESS CITY-ST-ZIP			3 STREET ADDRESS 5 4 CITY - ST - ZIP		
TITLE			5 1 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS		6	6.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY-ST-ZIP		
dd Idabasal	by partifu that the information ourselver	duvith this filips, does not exalify for:	Alan	ad in Caption 110 07(3)(i) Elevida Ciatulas	1 6 with an agent for the at the

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 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.

1941) 372-2583