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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

(1)

Mailing Address

BROOKS & LEBOEUF, P.A.

FILED Apr 25 1997 8:00am Secretary of State



863 E. PARK AVE. TALLAHASSEE FL 32301		863 E. PARK AVE. Tallahassee fl 32301-2620					
					3. Date Incorporated or Qualified 10/01/1987	3a. Date of Last 05/01/1996	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied for
21		26		59-2851636	1	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional		
22		27	27		5. Certificate of Status Desired	Fee Required	
City & State	е	City & State			Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country 25	7ip	Country 30		This corporation has liability for in Florida Statutes	ntangible tax under Yes \(\square\) No	s. 199.032,
	9. Name and Address of Curren				10. Name and Address of New Reg	stered Agent	
RRC	OOKS, RONALD W.		81 N	lame n	coles Donold W		
	E. PARK AVE.				ooks, Ronald W.		
1		82 Street Address (P.O. Box Number is Not Acceptable) 863 E. Park Avenue					
ואנ	LAHASSEE FL 32301		83				
					llahassee, FL 323	01	
			84 0	City		Fi 85 7ip	p Code
11. Pursuant i	to the provisions of Sections 607.050	2 and 607 1508. Florida Stati	itos the above n	anyad corn	oration submits this statement for the pr		ile registered
office or re	egistered agent, or both, in the State	of Horida, Such chance was	authorized by the	e corporati	on's board of directors. I hereby accep	t the appointment a	is registered
_	m familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes.				
SIGNATURE	Signature, typed or pointed name of registered age		ar amilmeter i i				
12.	OFFICERS AND		IL Registered Agent s	gnature require	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTO	100 IN 10
TITLE	D	DELETE	1.1 TITLE	D		Change	
NAME	BROÖKS, RONALD W.	L rettie	1.2 NAME	_		A Change	T Vanitali
STREET ADDRESS	1006 GROVELAND HILLS DR.				rooks, Ronald W.	3	
			1.3 STREET ADD		15 Moriah Creek R		
CITY-ST-ZIP	TALLAHASSEE FL	DETETE	1.4 CITY - ST - ZI	P C	rawfordville, FL		T a save-
TITLE	0	☐ DELETE	2.1 TITLE			Change	Addition
NAME	LEBOEUF, DEAN		2.2 NAME				
STREET ADDRESS	3828 SHAMROCK W.		2.3 STREET ADD	IRESS			
CITY-ST-ZIP	TALLAHASSEE FL		2 4 C(1Y - \$1 - Z	IF .			
TITLE		DELETE	3 1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADD	RESS			
CITY-ST-ZIP			3.4. CITY - S1 - Z	IP .			
TITLE		☐ DELEJE	4 1 TITLE	1		Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4 3 STREET ADD	RESS			
CITY-ST-ZIP			4.4 CITY - ST - ZI	Р			
TITLE		DELETE	51 TRUE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET ADD	RESS			
CITY-ST-ZIP			5.4.0(1Y+S1-Z)	P			
TITLE		DELETE	61 TITLE			☐ Change	Addition
NAME			6.2 NAME				<u>.</u>
STREET ADDRESS			6.3 STREET ADD	BESS			
CITY-ST-ZIP							
	ov certify that the information supplier	i with this filing does not rual	6.4 City - \$1 - 7il		in Section 119.07(3)(i) Florida Stalules	I further cortifu tos	at the

of accurate and that my signature shall have the same legal effect as if made under eath; that be execute this report as required by Chapter 607, Florida Statutes; and that my name