ANNU	PROFIT PORATION AL REPORT 1996	Sandro Secre DIVISION O	ARTMENT OF STATE a B. Mortham stary of State F CORPORATIONS				
 Corporation 	MENT # K19802 NATER PROPERTY MANAGE	2 (3)					
Principal Place of Business 1990 E. OCEAN P.O. BOX 1856 STUART FL 34996		Mailing Address 4797 SE COMPASS WAY 4797 P.O. BOX 1856 STUART FL 34997 US		3. Date Incorporated or Qualified 3a. Date of Last Report			
US		05		03/28/1988		08/01/199	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number 65-0071721			pplied For of Applicable
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional equired
City & State	>	Cty & State		Election Campaign Financing Trust Fund Contribution			May Be to Fees
3	Country 25	Z _i p	Country 30	8. This corporation has liability for Florida Statutes	intangible No	tax under s	199.032,
<u></u>	9. Name and Address of Curren			10. Name and Address of New F	Registere	Agent	
or register	to the provisions of Sections 607.0502 red agent, or both, in the State of Floric th, and accept the obligations of. Sections of Sections	lla: Such change was autho ion 607.0505, Florida Statut	rizer] by the corporation s bo	oration submits this statement for the pu and of directors. Thereby accept the app	irpose of coolintment	hanging its reas registered	egistered office agent. I am
12.	Signature, typed or printed raise of registers Taylord OFFICERS ANS	<u> </u>	13.	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR	
TITLE	PST COLACINO, JOYCE H.	☐ DELFTE	1 1 TITLE 1 2 NAME			Change	Addition
NAME STREET ADDRESS	614 S. FEDERAL HIGHWAY STUART FL		1.3 STREET ADDRESS				
	SIUMNI FL		1.4 CiTY - ST - ZIP				Addition
	D	DELETE	2 1 TITLE			Change	-
TITLE NAME	COLACINO, JOYCE H.	☐ DELETÉ	2 1 THLE 22 NAME			☐ Change	_
TITLE NAME STREET ADDRESS	1 *		2 1 TITLE				Addiso
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DETELE	2 1 THILE 22 NAME 23 STREET ADDRESS 24 0/1Y-S1-7/P 3 1 THE			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY		2 1 THILE 22 NAME 23 STREET ADDRESS 24 OHY - ST- ZIP				Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DELETE	2 1 THEE 22 NAME 23 STREET ADDRESS 24 CHY-ST-7/P 3 1 THE 32 NAME 33 STREET ADDRESS 34 CHY-ST-7/P			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY		2 1 THEE 22 NAME 23 STREET ADDRESS 24 OHY-ST-7IP 3 1 THE 32 NAME 33 STREET ADDRESS				Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DELETE	2 1 THEE 22 NAME 23 STREET ADDRESS 24 CHY-ST-ZIP 3 1 TH'LE 32 NAME 33 STREET ADDRESS 34 CHY-ST-ZIP 4.1 THEE			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DELETE	2 1 THEE 22 NAME 23 STREET ADDRESS 24 CHY-ST-ZIP 3 1 TH'LE 32 NAME 33 STREET ADDRESS 34 CHY-ST-ZIP 4.1 THEE 42 NAME 43 STREET ADDRESS 44 CHY-ST-ZIP			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DELETE	2 1 THILE 22 NAME 23 STREET ADDRESS 24 CHY-ST-ZIP 3 1 TH'LE 32 NAME 33 STREET ADDRESS 34 CHY-ST-ZIP 4.1 THE 42 NAME 43 STREET ADDRESS			☐ Change	Addition
STREET ADDRESS CITY+ST-ZIP TITLE	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DELETE	2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CHY-ST-ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CHY-ST-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CHY-ST-ZIP 5 1 TITLE			☐ Change	Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	DELETE	2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST-ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST-ZIP			☐ Change ☐ Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS	COLACINO, JOYCE H. 614 S. FEDERAL HIGHWAY	☐ DELETE	2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS			☐ Change	Addition

6.4 CHY-ST-ZIP

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/56

14. I do horeby 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 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 13 if changed, or on an attachment with an address (467)268-0598