## 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 # K30398

(7)

Principal Plac	L. COPELAND	Mailing Address % RODNEY L. COPE							
4623 FOREST W. PALM BCH US	HILL BLVD. STE 109 I FL 33415	4623 FOREST HILL BLVD. STE 109-1 W. Palm Beach Fl. 33415-7469			3. Date Incorporated or Qualified				
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number 65-0069909	1 0//	Ар	plied For t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	),			5. Certificate of Status Desired	E/	\$8.75 / Fee Re	Additional
City & Stat	le	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
Zip 24	Country 25	Zip 29	30	untry			Yes	] No	199.032,
	g, Name and Address of Currer	it Registered Agent				10. Name and Address of New Re	glatered /	Agent	
COPELAND, RODNEY L. 4623 FOREST HILL BLVD SUITE 109-1 W. PALM BEACH FL 33415				81	Name Street Ad	dress (P.O. Box Number is Not Acceptab	ole)		
				83					····
				84	City		FL	85 Zip (	Code
office or agent Ta	to the provisions of Sections 607-050 registered agent, or both, in the State am familiar with, and accept the oblig Signal religious or pented have of registered age					rporation submits this statement for the pation's board of directors. I hereby acception when reinstating)	DATE	changing its	s registered registered
12.	OFFICERS AN		13		·····	ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	S IN 12
TITLE NAME	PST COPELAND, RODNEY L.	DELET		TITLE NAME				Change	Addition
STREET ADDRESS CITY+ST-ZIP	4623 FOREST HILL BLVD W. PALM BEACH FL		1.4	CITY - S	T ADDRESS ST - ZIP				
TITLE NAME	D COPELAND, RODNEY L.	DELET		title Name	}			Change	Addition
STREET ADDRESS CITY-ST-ZIP	4623 FOREST HILL BLVD W. PALM BEACH FL				ADDRESS ST-ZIP				
TITLE NAME		DELET		TITLE NAME				Change	Addition
STREET ADDRESS					r adoress St-zip				
TITLE		☐ DELET	E 4,1	TITLE NAME				Change	Addition
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-ST-ZIP TITLE		DELET		CITY-S TITLE	1-814		<del></del>	Change	Addition

5.2 NAME

6.1 TITLE 62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

SIGNATURE:

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DiTY-ST-7IP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in information indicated on this annual report or supplemental annual report is true and accurate and that my I am an officer or director of the corporation or time receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or of an attach en) with an agrees.

DELETE

**FILED** 

May 08 1997 8:00am

Secretary of State

Change Addition