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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # K39540

(5)

EROSION ADVISORY SERVICE, INC.

FILED
May 02 1997 8:00am
Secretary of State



2700 HERTHA AV ORLANDO FL 32826 US		2700 HERTHA AVENU	Mailing Address 2700 HERTHA AVENUE ORLANDO FL 32828-3328 US			Date Incorporated or Qualified				
						10/18/1988		01/	31/199	
 1	Tace of Business	2a. Mailing Address				4. FEI Number 59-2914253			├ ──	Applied For Not Applicable
Suile, Apt.	. #, etc.	26 Suite, Apt #, etc	······································			5. Certificate of Status Des	ired	W	\$8.7	Additional Regulred
City & Stat	te	City & State				6. Election Campaign Finar	ncing		\$5.0	May Be
23		28				Trust Fund Contribution				d to Fees
Ζιρ 24	Country 25	Zip 29	30 Cour	ntry		8. This corporation has liab Florida Statutes		Yes [] No	r s. 199.032,
	9. Name and Address of Cui	rrent Registered Agent		-21		10. Name and Address of	New Reg	platered /	\gent	
	NNER, PERRY E.			81	Name					
	00 HERTHA AVENUE LANDO FL 32828				Street Add	Address (P.O. Box Number is Not Acceptable)				
				83						
			Ī	84	City			FL	85 Z	p Code
agent Ta	t to the provisions of Sections 607, registered agent, or bolh, in the S ani familiar with, and accept the of	bligations of, Section 607.050	5, Florida Stati	utes.			,,	· · · · · · · · · · · · · · · · · · ·		
GIONATURE	Stanatine, typed or pented name of registerer	d agen; and tile if applicable.	(NOTE Registered	Agen	nt signature requi	red when reinstating)		DATE		
12.	Signatine, typed or pented name of registerer OFFICERS	d agent and tille if applicable. AND DIRECTORS	(NOTE Registered	Agen	nț signature requi	red when reinstating) ADDITIONS/CHANGES TO	O OFFIC		DIRECT	ORS IN 12
	OFFICERS PST		13.		nt signature requi		O OFFIC		DIRECT	
12.	OFFICERS PST DANNER, PERRY	AND DIRECTORS	13.	LE	nt signature requi		O OFFIC			
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4. I do hereby certify that the information supplied with the thing 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 roport or supplier iteratal 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 ecceiver or fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted by the article with an address.

SIGNATURE

TATUBE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4/22/97

407-273-0289