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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	Jal report 1997		Secretary of State DIVISION OF CORPORATIONS				Secretary of State				
	MENT # K3 9 DE & JEFFRIES, IN		(2)								
Principal Place 4607 SE 1 AVE CAPE CORAL F US		4607 SE	Mailing Address 4607 SE 1 AVE CAPE CORAL FL 33904-8351 US				3. Date Incorporated or Qualified 3a. Date of Last Report				
							 Date Incorporated or Qualified 10/17/1988 	04/02/19		oort	
2. Principal F 21	Place of Business	├ -1	2a. Mailing Address				4. FEI Number 65-0108435		-	lied For Applicable	
Suite, Apt	#, etc	<u></u> ⊢¬	e, Apt. #. etc.			·	5. Certificate of Status Desired		75 Ad	ditional	
22 City & Stat	le	27 City	& State				6. Election Campaign Financing		.00 N		
23	Complex	28		T	otes		Trust Fund Contribution	A	ided to	Fees	
2φ 24]	Country Zip Co 25 29 30				B. This corporation has liability for intumgible tax under s. 199.032, Florida Statutes Yes \text{No}						
	9. Name and Addres	s of Current Registered	i Agent				10. Name and Address of New R	egistered Agent			
	NTICE, MICHAEL V.				81	Name				ļ	
4607 SE 1ST AVE. CAPE CORAL FL 33904					82	Street Ad-	dress (P.O. Box Number is Not Accepta	ble)			
Ora	L 0017212 00007				В3						
					84	City		85	Zip Co	ode	
44 Direction	In the preparions of Casti	oue 607 0502 and 607 15	OR Florida State	tos the a	DOV#	named on	orporation submits this statement for the	FL 65	ing ite	registered	
office or i	registered agent, or both are tamiliar with, and acce	in the State of Florida. S	uch change was	authorize	d by	the corpor	ration's board of directors. I hereby according	pt the appointme	nt as re	gistered	
SIGNATURE	or on the work, cores decor	An the Ollighmons of Co.	31(011 007 10000) 1	ional dia	ioio	•				1	
		of registerious gent at ointle if appli			d Age	ent signature req	pured when reinstating)	DATE	27000	(A) 10	
	PD	FICERS AND DIRECTOR	DÉLETE	11.	ITLE		ADDITIONS/CHANGES TO OFF	CERS AND DIRE		Addition	
NAME	JEFFRIES, GERALD	R.		1.2 N							
STEFF LAUGHESS	444 SW 20TH ST			1.3 S	TREE1	ADDRESS					
0:17 - 31 - 2H	CAPE CORAL FL			1.4 C	ITY - S	IT - ZIP					
TITLE	VID	u	DELETE	217				☐ Ch	inge	☐ Addition	
NAME	PRENTICE, MICHAEL 4607 SE 1ST AVE.	_ V.		2.2 N		I DEDUCA				1	
STREET ADDRESS CITY: ST-7'F	CAPE CORAL FL					ADDRESS I ST-ZIP					
FILE			DELETE	317		· · · · · · · · · · · · · · · · · · ·		☐ Ch	ange	Addition	
NAME				3.2 N	AME					ļ	
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City-St-ZiP						T-ZIP				ļ	
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NAME				5.2 N	AME					ļ	
SPEEL ADDRESS				5.3 S	TREET	ADDRESS					
CITY-ST 70			Dei Ete			ST - ZIP				A addition	
T- -			☐ DELETE	61 T				∐ Ch	មណិត	L_ Addition	
NAME STREET ADDRESS				62 N		ADDRESS				ļ	
SINELL ADDRESS				033	INCE	ער ביים				[

14. If do hereby cert ly that the information supplied with this filling 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FILED

Mar 18 1997 8:00am