FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00						FILED			
			FLORIDA DEPARTMENT OF STATE			May 19 1997 8:00am			
CORPORATION ANNUAL REPORT			Sandra B. Mortham			Secretary of State			
1997			DIVISION OF CORPORATIONS			Secreta	ary of	[]]	tate
	MENT # K Nanie E L. HAYES III, F		(4)						
Principal Place of Business Mailing Address 1 PROGRESS PLAZA 1 PROGRESS PLAZA SUITE 1210 SUITE 1210 ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701						A Date Incorporated or Qualified	3a. Date of	Last Re	
9 Drincipal D	lace of Business	2.	Mailing Address			10/26/1988 4. FEI Number	05/01/1		plind For
21 Principal Pi	ace or business	26	Mailing Address			59-2914460			plied For t Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			dditional
22 City & State 23	f:	27	City & State			6. Election Campaign Financing Trust Fund Contribution	\$		May Be
Zip 24	Coun 25	try 29	Zip	Col 10	intry	8. This corporation has liability for Florida Statutes	ntangible tax L Yes 🚺 No		1 9 9.032,
24		ress of Current Regist			81 Name	10. Name and Address of New Re			
SUN St.	ROGRESS PLAZA TE 1210 PETERSBURG FL 3		7 1608 Elocida Statuta	the	83 84 City	ress (P.O. Box Number is Not Acceptat	FL ⁸⁵		
office or r agent. La SIGNATURE	egistered agent, or bo m familiar with, and ac	th, in the State of Florid coept the obligations of,	a. Such change was au Section 607.0505, Flor	ithorize ida Sta	d by the corporal lutes.	lion's board of directors. I hereby acce	DATE	ient as i	registered
12.		OFFICERS AND DIREC	TORS	13.		ADDITIONS/CHANGES TO OFFIC			<u> </u>
10LE NAME	DP HAYES, GEORGE	· 4 10	DELETE	1.2 T				Chan g e	Addition
STREET ADDRESS	1 PROGRESS PL	AZA SUITE 1210		•	TREET ADDRESS				
City-St-ZiP	ST. PETERSBURG	FL 33701		-	ITY-ST-ZIP				Addition
TITLE NAME STRELT ADDRESS] DELETE	21T 22N 23S				Change	Addition C
CHT-ST-7P			DELETE	2.40 31T	CITY - ST - ZIP			Change	Addition
TITLE NAME STREL7 ADDRESS				3.2 N				und Nic	
CHY-ST-ZIP TITLE			DELETE	3.4. (4.1 T	CITY - ST - ZIP			Change	Addition
NAME					IAME			-	
STREE (ADDRESS				4.3 S	TREET ADDRESS				
CITY-ST-ZIP TITLE		······································	DELETE	4.4 C 5.1 T	ITY-ST-ZIP	······································		Change	Addition
NAME				52 N				•-	
STREET ADDRESS				5.3 S	TREET ADDRESS				
City-St-Zip Title		······································	DELETE	54C	ITY-ST-ZIP		ETA	Change	Addition
NAME			band Picklik	62 N				- · · · · · · · · · · · · · · · · · · ·	Bread - North Cort
STREET ADDRESS				635	TREET ADDRESS				
CHY-ST-ZIF	hy certify that the refer	mation supplied with th	s filing does not qualify	for the	TY-ST-ZIP	d in Section 119.07(3)(i), Florida Statute	s. I further ceri	ify that	the
informatio Lamianio appears i	m indicated on this an flicer or director of the in Block 12 or Block 13	nual report or suppleme	ental annual report is tru liver or trustee empowe	ie and red to i	accurate and that	it my signature shall have the same leg rt as required by Chapter 607, Florida s	al effect as if m	ade uno	der oath; that
SIGNAT	UKE:	IRE AND TYPED OR PRINTED	NAME OF SIGNING OFFICER C	UP N C B	Bac B TOR	Date	Daytime	Phone #	