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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra Ø. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # K50191 (1)FAR OUT, INC. Principal Place of Business Mailing Address 7650 SOUTH TAMIAMI TRAIL 7650 SOUTH TAMIAMI TRAIL SUITE 9 SARASOTA FL 34231 SARASOTA FL 34231-6818 3. Date Incorporated or Qualified 3a. Date of Last Report 12/01/1988 04/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2062 HARVARD HARVARO 65-0096153 2062 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be SHRASOTA SARASOTA Trust Fund Contribution  $\Box$ Added to Fees 8. This corporation has liability for intendible tax under s. 199.032, Yes No Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SILVER, DENNIS S., P.A. **6624 GATEWAY AVENUE** Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34231 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. Change Addition DELETE THE 1.1 TITLE FAHRER, JERRY E. 1.2 NAME NAME: HARVARD 2062 7650 S. TAMIAMI TRAIL #9 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ST DELETE 2.1 TITLE TITLE FAHRER, BETTY J 2.2 NAME NAME 206a 7650 S. TAMIAMI TRAIL #9 2.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 2. 4 CITY - ST - ZIP CITY-ST-7/F DELETE Addition MILE 3.1 TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE Change 4.1 TITLE Addition 11713 NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition THLE 5.1 TITLE **5.2 NAME** NAME STREET ACORESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DEFELE Change Addition TULE 61 TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. To hereby certify that the information supplied with this filing 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 13 if charged, or on an attachment with an explanation.

FILED Apr 17 1997 8:00am Secretary of State

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