FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

| | 1996 | O COUNTY OF | DIVISION C | OF CORPORATI | IONS | | | | | |
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| , | TER AND COM | MPANY, INC. | ` . | • | | | | | | |
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| Principal Place | of Business | | Mailing Address | | | | | | | |
| % G LAUR | ENCE BAGGETT, ES | o | % G LAURENCE B | AGGETT ESO | | | | | | |
| | ANDERSON EACH FL 32136 | | 5107 JOHN ANDER | rson | | | | | | |
| reducti de | NOH FL 32130 | | FLGLER BEACH FI | L 32136 | | 3. Date Incorporated or Qu | alified | 3a. Date of | Last R | eport |
| Diseased Di- | 4 B | | · · · · · · · · · · · · · · · · · · · | | ·· ···· | 12/20/1988 | | 04, | /03/1 | 995 |
| . Enilicipai ela | ice of Business | ⊢ - | 2a. Mailing Address | | | 4. FEI Number 59-2924789 | | | | Applied For |
| Suite, Apt. # | I, etc. | | Suite, Apt. #, etc. | | | | | | | Not Applicable Additional |
| L | | 2 | 27 | | <u> </u> | 5. Certificate of Status Des | ired | | | Required |
| City & State | | ļ. | Orty & State | | | 6. Election Campaign Finar | ncing | | \$5.0 | О Мау Ве |
| 1 Zip | T Cou | untry 2 | Zip | Country | · | Trust Fund Contribution | | | | to Fees |
| l | 25 | 2 | 29 | 30 | , | This corporation has liab Florida Statutes | | tangible tax ur M No | nder s | 199.032, |
| | 9. Name and Ad | dress of Current Re | gistered Agent | | , · · · · · · · · · · · · · · · · · · · | 10. Name and Address of | | | nt | |
| DAGGE | | - FAA | | 81 | Name | | | | | |
| | ett, G. Laurenc Halifax ave | E ESQ | | 82 | Street Add | dress (P.O. Box Number is Not Ac | ceptable |) | | |
| | MALIFAX AVE INA BEACH FL 3: | 2018 | | 83 | | | | | | |
| DATE | TIN DENOTITE OF | 2010 | | | | | | | | |
| | | | | | | | | | | Code |
| familiar with | | | 607.1508, Florida Statu uch change was authori 07.0505, Florida Statute | | 1 ' | oration submits this statement for ard of directors. I hereby accept the | the purpo he appoir | FL 8 | 1_ | · · · · · · |
| familiar with GNATURE _ s | n, and accept the ob | ame of registered agent and titi | 07.0505, Florida Statute | ites, the above-rized by the corposis. | named corpor poration's boa | ard of directors. I hereby accept to | ne appoir | DATE | ng its re stered | egistered offic agent. I am |
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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. 904-439-6253

SIGNATURE:

WHO WAME OF STOPHE OF CIER OF DIRECTOR DIRECTOR NANCY J. KNAP 4/3/86