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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

28. Mailing Address 4. FEI  29  Suite, Apt. #, etc 5. Cert  City & State Country Cip Country Country Cip Country Cip Country City City Country City City City City City City City Cit	3/1988 04/14	No gent  85 Zip Code  harging its registered
2. Principal Place of Business	2/1988 04/14 2923001 cate of Status Desired con Campaign Financing Fund Contribution corporation has liability for intangible to a Statutes Yes condition and Address of New Registered Age Number is Not Acceptable)	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199 032, No pent  Sip Code
2. Principal Place of Business	cate of Status Desired con Campaign Financing Fund Contribution corporation has liability for intangible to a Statutes Yes condition and Address of New Registered Age Number is Not Acceptable)	Applied For Not Applicable  \$8.75 Additional Fee Required  \$5.00 May Be Added to Fees ax under s. 199 032, No gent  85 Zip Code
Suite, Apt. #, etc  22  City & State  City & State  28  City & State  29  Country  Zip  Country  Zip  Country  Zip  Country  S. This  Flori  9. Name and Address of Current Registered Agent  PEEPLES, JAMES W. III  505 N. ORLANDO AVE P O BOX 320757  COCOA BEACH FL 32932-0757  COCOA BEACH FL 32932-0757  11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statutes, the above-named corporation suboffice or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board agent i am familiar with, and accept the obligations of, Section 607, 0505, Florida Statutes.  SIGNATURE  Signature  PO	cate of Status Desired  on Campaign Financing Fund Contribution  orporation has liability for intangible to a Statutes  and Address of New Registered Age  x Number is Not Acceptable)	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees ax under s. 199 032, No sent  85 Zip Code
City & State City & State Zip	on Campaign Financing Fund Contribution  Orporation has liability for intangible ta a Statutes  And Address of New Registered Ag x Number is Not Acceptable)	Fee Required  \$5.00 May Be Added to Fees ax under s. 199.032, No gent  25 Zip Code
City & State  Zip  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Signature  9. Name and Address of Current Registered Agent  10. Name  82 Street Address (P.O. E  83 City  11. Pursuant to the provisions of Soctions 607 0502 and 607.1508, Florida Statutes, the above-named corporation sub office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature  Signature Interpretation professional agent and the Jacpitable (NOTE Registered Agent algoriture required when remain the provision by the corporation's board agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature Interpretation professional agent and the Jacpitable (NOTE Registered Agent algoriture required when remain the provision by the corporation's board agent algoriture required when remain the provision by the corporation's board agent algoriture required when remain the provision by the corporation's board agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature  PD  MCDANIEL, LARRY  13 STREET ADDRESS  14 City-SI-ZIP  TITUSVILLE FL  JOELETE  JOELETE  JOELETE  41 TITLE  NAME  SIRRET ADDRESS  GIY-SI-ZIP  TITLE  JOELETE  ALTITLE  ALTITLE  41 TITLE  41	Fund Contribution  orporation has liability for intangible to a Statutes  and Address of New Registered Age  x Number is Not Acceptable)	\$5.00 May Be Added to Fees ax under s. 199.032, No gent  85 Zip Code
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21p   Country   Zip   Country   Sip   Country   Signature   Sign	a Statutes Yes And Address of New Registered Ag  x Number is Not Acceptable)	No gent  85 Zip Code  harging its registered
9. Name and Address of Current Registered Agent PEEPLES, JAMES W. III S05 N. ORLANDO AVE P O BOX 320757 COCOA BEACH FL 32932-0757  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation sub office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE S07 OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDI TITLE NAME MCDANIEL, LARRY 12. NAME 13. STREET ADDRESS 135 PLANTATION DR. 13 STREET ADDRESS 135 PLANTATION DR. 13 STREET ADDRESS 135 PLANTATION DR. 137 PLANTATION DR. 138 PLANTATION DR. 138 PLANTATION DR. 139 PLANTATION DR. 140 PLETE 140 PLETE 150 PLETE 15	and Address of New Registered Advisor	85 Zip Code
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office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board agent. Earn familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Support or professional of registered agent and title of applicable		nanging its registered ntment as registered
SIGNATURE	its this statement for the purpose of c f directors. I hereby accept the appoi	
12. OFFICERS AND DIRECTORS   13. ADDITITE		
DELETE	g) DATE	
NAME	ONS/CHANGES TO OFFICERS AND D	
STREET ADDRESS		Change Addition
DELETE   TITUS VILLE FL   1.4 CITY-ST-ZIP		
TITLE   SDT   DELETE   21 TITLE     NAME		
NAME		Change Addition
STREET ADDRESS   135 PLANTATION DR.   2.9 STREET ADDRESS   2.4 CITY-ST-ZIP   TITUSVILLE FL   DELETE   3.1 TITLE     3.2 NAME   3.2 NAME   STREET ADDRESS   3.3 STREET ADDRESS   CITY-ST-ZIP   3.4 CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   4.1 TITLE   CITY-ST-ZIP   CIT	•	
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STREET ADDRESS 43 STREET ADDRESS		
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TITLE DELETE 51 TITLE		Change Addition
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TITLE DELETE 6.1 TITLE  NAME 6.2 NAME		Change   Addition
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS		Change Addition
City St-ZiP 6.4 City - St-ZiP		_ Change Addition
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section information indicated on this annual report or supplemental annual report is true and accurate and that my signate I am an officer or director of the corporation or the receiver of trustee empowered to execute this eport as required.		Change Addition

**SIGNATURE:** 

FILED

Jan 22 1997 8:00am

Secretary of State