

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3. Date Incorporated or Qualified 01/12/1989		3a. Date of Last Report 03/01/1994	
4. FEI Number 59-2929748		Applied For	
		Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No			

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

10. Name and Address of New Registered Agent

(P.O. Box Number is Not Acceptable)

FL 85 Zip Code

9. Name and Address of Current Registered Agent	
HENDERSON, JOHN T. 1420 WILDWOOD COURT DUNEDIN FL 34698	81 Name
	82 Street Address
	83
	84 City

11. Pursuant to the provisions of Sections 607.0532 and 607.1009, Florida Statute, 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 or the sole member, or, if the change is to a registered agent familiar with, and accepts the obligations of, Section 607.0135, Florida Statute:

SIGNATURE John Henderson Sec/Treas. 4/12/85

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	HENDERSON, DEBRA L.	1.2 NAME	
STREET ADDRESS	1420 WILDWOOD COURT	1.3 STREET ADDRESS	
CITY - ST - ZIP	DUNEDIN FL	1.4 CITY - ST - ZIP	
TITLE	ST	2.1 TITLE	☐ Change ☐ Addition
NAME	HENDERSON, JOHN T.	2.2 NAME	
STREET ADDRESS	1420 WILDWOOD COURT	2.3 STREET ADDRESS	
CITY - ST - ZIP	DUNEDIN FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 this 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 addenda.

SIGNATURE: John Henderson John Henderson 1/18/95 813 734 8389
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date