## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

22   Principal Place of Business   2a   Maiting Address   4   FEI Number   65-0222403	Applied For Not Applicable  \$8.75 Additional Fee Required  \$5.00 May Be Added to Fees Lax under s 199.032, No Agent
Principal Place of Business Mailing Address  856 WOODLANDS DR PT. ST. LUCIE FL 34952  2. Principal Place of Business 2. Mailing Address 4. FEL Number 65/23/1989  2. Principal Place of Business 2. Mailing Address 4. FEL Number 65-0222403  Suite, Apt. #, etc. 5. Certificate of Status Desired 5. Certificate 5. Cer	Applied For Not Applicable  \$8.75 Additional Fee Required  \$5.00 May Be Added to Fees Lax under s 199.032, No Agent
B86 WOODLANDS DR   B86 WOODLANDS DR   PT. ST. LUCIE FL 34952   PT. ST	Applied For Not Applicable  \$8.75 Additional Fee Required  \$5.00 May Be Added to Fees Lax under s 199.032, No Agent
PT. ST. LUCIE FL 34952  PT. ST. LUCIE FL 34952  3. Date Incorporated or Qualified 05/23/1989  10/  2. Principal Place of Business  2a. Making Address  4. FEL Number 65-0222403  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  27  City & State  City & State  29  30  8. This corporation has liability for intangible Florida Statutes  Principal Statutes  PORT ST. LUCIE FL 34952  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 coffice 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 appoint agent. Lam lamiliar with, and accept the obligations of Section 607 0505, Florida Statutes  SIGNATURE  Signume type of the first agent and the Lagelands. (NOTE Registered Agent spatial registered agent or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. Lam lamiliar with, and accept the obligations of Section 607 0505, Florida Statutes agent agent or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent. I am lamiliar with, and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE  Signume type of the provisions of Section 607 0505 and 180 Florida Statutes. The state of Florida Statutes agent or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent agent or both, in the State of Florida Such change was authorized by the corporation submits the statement for the purpose of confliction of the collegation of t	Applied For   Not Applicable
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2. Principal Place of Business 2. Mailting Address 3. Suite, Apt. #, etc. 3. City & State 4. Election Campaign Financing Trust Fund Contribution 3. Trust Fund Contribution 4. Election Campaign Financing Trust Fund Contribution	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Lax under s 199.032, No Agent
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  Signate BS WOODLANDS DRIVE PORT ST. LUCIE FL 34952  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 confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes the above-named corporation submits this statement for the purpose of confice or registered agent or both, in the State of Florida Statutes  Signature Upscrope print rate of the purpose and the Flagobase (NoTt. Registered Agent syname required who moust only 1. Date.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND MAKE  LINEBURG, GREGORY L  12. NAME	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Lax under s 199.032, No Agent  85 Zip Code
27 City & State 28 City & State 29 Country Zip Name and Address of Current Registered Agent UNEBURG, GREGORY L. 895 WOODLANDS DRIVE PORT ST. LUCIE FL 34952  10. Name and Address of New Registered Agent Street Address (PO. Box Number is Not Acceptable)  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 coffice 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE Signature Lipidor printed state of registered agent and the Lappheable (NOTE Registered Agent signature deprint around)  Date  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. Pursuant to the provisions of Section Statutes and the Lappheable (NOTE Registered Agent signature deprinted agent with residuong)  Date  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. In RILE  P LINEBURG, GREGORY L.  15. In RILE  P LINEBURG, GREGORY L.  16. Election Campaign Financing Trust Fund Contribution That I are a composition for intending the lappheable of the composition of the comp	Fee Required \$5.00 May Be Added to Fees Lax under s 199.032, No Agent
City & State  28  City & State  28  Country  Zip  Country  Zip  Country  Zip  Country  Signature: Upsafer disperse and Exercise and accept the obligations of, Section 607.0505, Florida Statutes  City & State  City & State  Country  Zip  Country  R. This corporation has liability for intangible priorida Statutes  Florida Statutes  Yes   10. Name and Address of New Registered Agent  LINEBURG, GREGORY L.  885 WOODLANDS DRIVE  PORT ST. LUCIE FL 34952  81  Name  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL  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 confinee 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature: Upsafer principles and entire it agents and the it applies agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.  Signature: Upsafer principles and principles an	\$5.00 May Be Added to Fees Lax under s 199.032, No Agent
Zip Country Zip Country B. This corporation has liability for intangible and provided range of period and accept the obligations of Section 607.0505 Florida Statutes the above-named corporation's board of directors. I hereby accept the appoint agent. I am familiar with, and accept the obligations of Section 607.0505 Florida Statutes.  28	Added to Fees Lax under s. 199.032, No Agent  85 Zip Code
9. Name and Address of Current Registered Agent  LINEBURG, GREGORY L.  85 WOODLANDS DRIVE PORT ST. LUCIE FL 34952  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 confice 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 appoint agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature typed or profiled rate of rich stered agent and the it applicable. (NOTE Begistered Agent September Registered with measting)  Date  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND TITLE  P	No Agent
9. Name and Address of Current Registered Agent  LINEBURG, GREGORY L. 895 WOODLANDS DRIVE PORT ST. LUCIE FL 34952  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL  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 coffice 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 appoint agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature Upsider policitizate of registered agent and the Lapple and No. 18 Registered Agent segnature agent requires when recastleing)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND TILLE  P	Agent  85 Zip Cade
LINEBURG, GREGORY L.  895 WOODLANDS DRIVE PORT ST. LUCIE FL 34952  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL  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 confice 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 appoint agent it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or printed runs of registered agent and the Tappilicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND TITLE  P. DELETE  11 TITLE  12 NAME  LINEBURG, GREGORY L.  12 NAME	.
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SIGNATURE    Signature typed or printed rates of registered agent and title it applicantle.   (NOTE Begistered Agent signature requires when recastioning)   DATE	intment as registered
Signature typed or principle raise or registered agent and that applicable   (NOTE Beg street Agent signature requires when resisting)   DATE	
TIFLE P DELETE 11 TIFLE  NAME LINEBURG, GREGORY L 12 NAME	DIRECTORS IN 12
	Change Addition
STREET ADDRESS 895 WOODLANDS DR 13 STREET ADDRESS	
DE AT LIACE EL	
OTY-ST-ZIP	Change Addition
NAME LINEBURG, MARY FRANCES 22 NAME	
STREET ADDRESS 895 WOODLANDS DR 23 STREET ADDRESS	
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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)(k 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	

SIGNATURE: #11904 L. LINEDUS 9 President 8/2/96 (407) 4613738

BIGNATURE: BIGNATURE AND BYPED OF PRINTED NAME OF SIGNING OFFICER ORDINECTOR

BIGNATURE DAY L. LINEDUS 9

Day 100 President Preside