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

PROFIT

SIGNATURE:

THE WAY

FLORIDA DEPARTMENT OF STATE

FILED Mar 12 1997 8:00am

0439540

| CORPORATION ANNUAL REPORT 1997 | | Sendre B. Mortham Secretary of State DIVISION OF CORPORATIONS | | Secretary | or Stat | .e | | |
|---|--|--|------------------------------|--------------------|---|----------------------------------|-----------------------------|--|
| Corporate | MENT # K93417 ROWN, INC. | 7 (9) | | | | | | |
| Principal Place of Business Mailing Address 5430 WEST GULF TO LAKE HWY PO BOX 2172 CRYSTAL RIVER FL 34429 US Mailing Address CRYSTAL RIVER FL 34423-2 US | | | 23-2172 | | | | | |
| | | | | | Date Incorporated or Qualified 06/05/1989 | 3a. Date of Last R 04/02/1996 | leport | |
| 2. Principal F 21 | Place of Business | 2a. Mailing Address | | | 4. FEI Number 59-2997443 | f | optied For of Applicable | |
| Suite Apt | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | Additional equired | |
| City & Stat | tion of the second confidence of the second co | City & State | | | Election Campaign Financing Trust Fund Contribution | \$5.00 | May Be to Fees | |
| 7(p) | | | Count | ry | This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No | | | |
| | g. Name and Address of Curren | | 8 | 1 Name | 10. Name and Address of New Ro | sgistered Agent | | |
| C11 E DEMNEVIVANIA AVENITE | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | NNELLON FL 32630 | | L | 1 | acress (F.O. BOX Normbal is Not Accepta | uie) | | |
| | | | 8 | 3 | | | | |
| | • | | 8 | 4 City | | FL 85 Zip | Code | |
| 11, Pursuant office or agent. La SIGNATURE | to the provisions of Sections 607.056 registered agent or both, in the State am familiar with, and accept the oblig | | | | orporation submits this statement for the ration's board of directors. I hereby acce | | ts registered registered | |
| 12. | Sign of the style in a printed ranne of registered as OFFICERS AN | or and the it applicable (N ID DIRECTORS | IOTE Flegislered A | gent signature rec | quired when reinstating) ADDITIONS/CHANGES TO OFFI | DATE CERS AND DIRECTOR | 3S IN 12 | |
| Title | D DELETE | | 1.1 TITLE | | | ☐ Change | Addition | |
| NAME | BROWN, RICHARD T. 5430 W GULF TO LAKE HWY | | 1.2 NAM | | | | | |
| STREET ADORESS: - Colbi-St. Zin | CRYSTAL RIVER FL | | 1.3 STRE 1.4 CITY | ET ADDRESS | | | | |
| - (277-3 - 77 | D | ☐ DELETE | 2.1 TITLE | | <u> </u> | Change | Addition | |
| MAM | BROWN, SAMANTHA N. | | 22 NAM | | | | { | |
| STREET ACOUSS | 5430 W GULF TO LAKE HWY CRYSTAL RIVER FL | | 2.3 STRE 2. 4 CITY | ET ADORESS | | | | |
| City-ST ZiP Titet | D | DELETE | 3.1 TITLE | | | ☐ Change | Addition | |
| NAME | CLARK, JOHN H., II | | 3.2 NAM | | | | } | |
| STREET ADDRESS | 5622 W. BONANZA DRIVE | | | ET ADDRESS | | | } | |
| OFF ST 76 | BEVERLY HILLS FL | DELETE | 3.4 CITY 4.1 TITLE | | | Change | Addition | |
| NAME | CLARK, ELEANOR COCHRAN | — | 4. C 10 LE | ı | | <u></u> charge | | |
| STREET ADDRESS. | 5622 W. BONANZA DRIVE | | 4.3 STRE | ET ADDRESS | | | | |
| CHY-ST 7P | BEVERLY HILLS FL | | 4.4 CITY | | | | | |
| 1011 | | ☐ DELETE | 5.1 11715 | 1 | | ☐ Change | L Addition | |
| NAME STREET ADORESS | | | 5.2 NAM 5.3 SYRE | ET ADORESS | | | - | |
| City - \$1, 7iP | | | 5.4 CITY | | | | Ì | |
| 1616 | | ☐ DELETE | 6,1 TITLE | | | ☐ Change | Addition | |
| NAM! | | | 6.2 NAM | | | | | |
| STREET ADDRESS | | | - 6 | ET ADDRESS | | | | |
| 011y-Si-ZiP 14. I do fiere | L by certify that the information surrolle | ed with this filling does not ac | 6.4 CITY alify for the ex | remption stat | ted in Section 119.07(3)(i), Florida Statut | es. I further certify that | the | |
| intormati | on indicated on this annual terroit or | supplemental annual renort. | is true and ac | curate and th | hat my signature shall have the same leg port as required by Chapter 607, Florida | ial effect as if made un | ider oath: that l | |

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR