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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

573 (6)

<b>1.</b> Co	proporation Nation Problems  Problems  pal Place of E	DUS PRINTING, INC.	Mailing Address					
3710 CLEVELAND AVENUE FORT MYERS FL 33901 US			3710 CLEVELAND AVENUE FORT MYERS FL 33901 US					
						3. Date Incorporated or Qualified 07/26/1989	3a. Date of Last Report 04/25/1995	
2. Pr 21	incipal Place d	of Business	2a. Mailing Address 26			4. FEI Number 65-0136884	Applied Not Ap	d For pplicable
	iite, Apt. #. et	e.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Addi	
23 23	y & State		City & State			Election Campaign Financing     Trust Fund Contribution	S5.00 May	у Ве
Zıj 24	p	Country 25	Zip Country 29 30			8. This corporation has liability for it	ntangible tax under s 199.0	
- T	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
	SMITH WILL	LIAM R., ESQ.		81	Name			•
1	8191 COLLE	EGE PARKWAY, STE 300		82	Street Addr	ress (P.O. Box Number is Not Acceptab	e)	
	Suite C-2 Fort Myer	RS FL 33919		83				
				84	City		FL 85 Zip Code	
Į.	or registered a amiliar with, ar ATURE	e provisions of Sections 607,0502; gent, or both, in the State of Florida accept the obligations of, Section the model of the forms of regulated agent a	<ul> <li>Such change was authorize n 607.0505, Florida Statutes.</li> </ul>	is, the above-red by the corporate Registered Agen	oration's boar	ration submits this statement for the pur rd of directors. I hereby accept the appo	pose of changing its register introduced agent DATE	red office t. I am
12.		OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		12
TITLE		STD VINCHCOMBE, EDWARD D.	□ DELETE	1. 1 TITLE			☐ Change ☐	Addition
NAME	1	3710 CLEVELAND BLVD.	1					
Cly-S	ADD 11.33	ORT MYERS FL		1.3 STREET				
THE CHI-S	F	)	☐ DELETE	1.4 CITY - S 2 1 TITLE	1-214		Change []	Addition
NAM:		VINCHCOMBE, GRACE		2.2 NAME			G + ·····•	
STREET		3710 CLEVELAND BLVD.		2 3 STREET	ADDRESS			
CHYS	ST ZiP	FORT MYERS FL		24 CITY - S	T-ZIP			
THEF			☐ DELETE	3 1 TITLE			Change	Addition
NAME				3 2 NAME				
CIDES	ADDRESS			33 STREET				
THE	1.71		DELETE	34 CITY - S 4 1 TITLE	1-211		Change D	Addition
NAME:			4 2 NAME					
STREET	ADDRESS			4 3 STREET	ADDRESS			
011y - \$	ST - 20P			4 4 CHTY - S	I - ZIP			
THE			☐ DELETE	5 1 TITLE			Change 🔲 .	Addition
NAMÉ			52					
	ADDRESS	58		5.3 STHEET ADDRESS				
CHY-S THE	i1 - Z4E			54 CITY-S	T - 71P			Addition
NAME			DELETE 6.1 TITLE				Change	Addition
	ADDRESS			6 3 STREET	AUDBESS			
CITY-S				64 CITY-S	i i			
14.	do hereby cei	rtify that the information supplied w	th this filing is voluntarily furni	shed and does	not qualify for	or the exemption stated in Section 119.	07(3)(k), Florida Statutes. I fu	urther
0	atn; that F <b>am</b>	information indicated on this annual an officer or director of the corpora ck 12 or Block 13 if changed, or or	ation or the receiver or trustee	: empowered t	e and accura o execute this	ite and that my signature shall have the s report as required by Chapter 607, Fic	same legal effect as if made irida Statutes; and that my r	under name

SIGNATURE: V Grace Winehanhe 2-26-96 (941) 939-206-

3R2E034 (12/95)