## 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

DOCUMENT # L15637

(6)

## **FILED** May 06 1997 8:00am Secretary of State

AUCM, ING.										
Principal Piac	e of Business	Mailing Address								
% ALLAN D. MERRILL 1724 ROSE STREET KEY WEST FL 33040		% ALLAN D. MERRILL 1724 ROSE STREET KEY WEST FL 33040-5322								
						3. Date Incorporated or Qualified 09/11/1989	3a. Date of 07/08/1		eport	
	Place of Business	2a. Mailing Address				4. FEI Number		Ap	plied For	
21	# 616	26			···	65-0220952			t Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc	), 		·	5. Certificate of Status Desired	□ \$ <sup>5</sup>	<b>B.75</b> <i>A</i> Fee Re	Additional quired	
City & Stat	le	City & State				6. Election Campaign Financing			May Be	
23 1 Zip	Country	28				Trust Fund Contribution		Added t		
24 . 25		Zip	Zip Country 30			8. This corporation has liability for intangible tax under s. 199.032, florida Statutes				
4	9. Name and Address of Curre	ent Registered Agent		1		10. Name and Address of New Reg				
MEF	RILL, ALLAN D.	· ····································		81	Name				TT - 1 / 11/41 /41-41	
1724	4 ROSE STREET			82	Stroot Ac	dress (P.O. Box Number is Not Acceptab				
KEY	WEST FL FL 33040			102	Oli GOL MC	rolless (F.O. Dox Number is Not Acceptab	e)			
				83						
ì				84	Cily		85	Zip (	Code	
de D	10 007.00				•			,		
	registered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida. Such change igations of, Section 607.050	itatutes, trie a was authori≱c 5, Florida Sta	d by	e-named ed / the corpo s.	orporation submits this statement for the praction's board of directors. I hereby accep	urpose of chai tithe appointn	nging its nent as i	s registered registered	
SIGNATURE	Signature typed or printed name of registered a	kiest and title I applicable	(NOTE: Bugistère	anA ba	ol signature res	pulsed when reinstating)	DA1E.			
12.		ND DIRECTORS	13.		- 8	ADDITIONS/CHANGES TO OFFICE		ECTOR	S IN 12	
TITLE	D	DELETI	1.1 7	ITL€				Change	Addition	
NAME	MERRILL, ALLAN D.		1,2 N	AME						
STREET ADDRESS	1724 ROSE STREET		1.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	KEY WEST FL			11Y - S	1 - 7IP					
TITLE				2.1 TITLE				Change	Addition	
NAME			2.2 N			•				
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE			31 · 71P					
NAME		Detent					اليا	)hange	L_ Addition	
STREET ADDRESS			3.2 N		ADDRESS					
CITY-ST-ZIP										
TITLE		DELETE			51-202		<u> </u>	Change	Addition	
NAME			4.21					ango	C ADDITION	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				ny-s	1					
TITLE		DELETE		5.1 TITLE				hange	Addition	
NAME	5.		5.2 N	5.2 NAME						
STREET ADDRESS			5.3 S	REF1	ADDRESS .					
CITY-ST-ZIP				1Y-8	T-ZIP				-	
TITLE		☐ DELETE	6.1 T	TLE.				hange	Addition	
NAME			62 N	4MÉ						
STREET ADDRESS			635	IREE1	ADDRESS					
CITY-ST-ZIP			640	TY- \$	1 - ZIP					
14. [ <b>d</b> o heret	by certify that the imprimation supple	ed with this filing does not d	qualify for the	ехе	mption stat	ed in Section 119.07(3)(i), Florida Statutes	I further certi	fy that t	he	

nual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that operation is the receiver or trustee emologyined to execute this report as required by Chapter 607, Florida Statutes; and that my name