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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. M@rtham

	JAL REPORT <b>1997</b>			ary of State CORPORATIONS		Secretar	y of	State
DOCUI	MENT # I		(1)	140000000000000000000000000000000000000				
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Principal Place of Business 521 DOBBS RD. NT ≢7 T. AUGUSTINE FL 32086		2521 Unit	Mading Address 2521 DOBBS RD. UNIT #7 ST. AUGUSTINE FL 32086-5294					
or. AUGUSTINE	E FE 32000	<b>91.</b> 1	NUGUSTINE FE 8200	O-3K <del>04</del>	J " .	ncorporated or Qualified	3a. Date 04/16	of Last Report
2. Principal P	tace of Business	26. 1 26	Mailing Address		4. FEI N		1 01/10	Applied For Not Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.			cate of Status Desired		\$8.75 Additional Fee Required
City & State	ee		City & State	-		on Campaign Financing Fund Contribution		\$5.00 May Be Added to Fees
Ζιρ <b>4</b> ]	Gouin <b>25</b>	29	Zip	Country 30	Florid		Yes 🔲	No
	<ol> <li>Name and Add</li> <li>IZENBERG, GREG</li> </ol>	ress of Current Registe	ered Agent	81 Nar		and Address of New Re	gistered Ag	ent
<b>\$</b> T. <i>i</i>	1 DOBBS ROAD AUGUSTINE FL 320			83 84 City			FL	85 Zip Code
11. Parsuant office or r agent 1 a	to the provisions of Se registered agent, or bo on familiar with, and ac	ections 607.0502 and 607 oth, in the State of Florida scept the obligations of,	7.1508, Florida Statu a. Such change was Section 607.0505, F	utes, the above-name authorized by the delinion of the delinio	ed corporation subrections or subrection sub	nits this statement for the portion of directors. I hereby accept	ourpose of ch pt the appoin	anging its registered tment as registered
	Standare, typical or prioted na	ine of registered agent and theif	applicable (NC	DTE. Registered Agent signs	ture required when reinstati	ng)	DATE	
SIGNATURE	Standare, typical or profed na		applicable (NC	OTE: Registered Agent signs	iture required when reinstati	ng) ONS/CHANGES TO OFFIC	DATE CERS AND D	IRECTORS IN 12
Signature 12. http://doi.org/10.000	Standare, typed or proted na	ine of registered agent and theif	applicable (NC	DTE. Registered Agent signs	iture required when reinstati	ng) ONS/CHANGES TO OFFIC	DATE CERS AND D	IRECTORS IN 12
SIGNATURE 12. HILL VAME	Standare, typical or profed na	ine of registered agent and the if OFFICERS AND DIRECT	applicable (NC	DTE: Registered Agent signs 13. 1.1 TITLE	iture required when reinstati	ng) ONS/CHANGES TO OFFIC	DATE CERS AND D	RECTORS IN 12 Change
SIGNATURE  12. HILL HAME STREET ADDRESS	VD HUBBARD, RICK 2 BAY 9TH STRE WEST ISUP NY	ine of registered agent and the if OFFICERS AND DIRECT	applicable (NC I ORS DELETE	DTE Registered Agent signs 13. 1.1 TITLE 1.2 NAME	ADDIT VD Hubbard SS 2844 C	ONS/CHANGES TO OFFICE	DATE CERS AND D	IRECTORS IN 12 Change
SIGNATURE  12.  HUT  NAME  STREET ADDRESS  CTY-ST-ZP  HUE  NAME	VD HUBBARD, RICK 2 BAY 9TH STRE WEST ISUP NY SD HUBBARD, BARB 2521 DOBBS RO	ine of represend agent and life if OFFICE RS AND DIRECT  ET  ARA AD 1	applicable (NC	13. 1.1 TITLE 12 NAME 1.3 STREET ADORE	ADDIT Hubbard S 2844  LOSET Hubbard Hubbard LOSET  ADDIT  Hubbard	ONS/CHANGES TO OFFICE  CICK  WHY Street  CSUP, NY  JBAY baya  JBOS Road SK	DATE CERS AND D	IRECTORS IN 12 Change
SIGNATURE  12.  HILL  NAME  STREEL AUCHESS  C-17-S1-ZP  THUE  NAME  SINGEL AUCHESS  GUY-S1-ZP	VD HUBBARD, RICK 2 BAY 9TH STRE WEST ISUP NY SD HUBBARD, BARB 2521 DOBBS ROST. AUGUSTINE	ine of represend agent and life if OFFICE RS AND DIRECT  ET  ARA AD 1	Applicable (NC	13. 1.1 TITLE 12 NAME 1.3 STREET ADORE 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADORE 2.4 CITY - ST - ZIP	ADDIT VD Hubbard SET TO	ONS/CHANGES TO OFFICE  Rick  Why Street  ESCIP NY	DATE CERS AND D  () () () () () () () () () () () () ()	IRECTORS IN 12 Change Addition Change Addition
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Barbara Hubbard 3-17.97 (904)829-3336 0017522

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Apr 17 1997 8:00am