F	ON OR BEFORE 8/7/96: \$225 (IF DISS		AUGUST 7, 19 E to reinstate		- 1		
PROFIT CORPORATION ANNUAL REPORT  1996  FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS							
	MENT # 1 2468	-					
·	BUSINESS TAX & ACCOL	` '				niai arani alain alain a	1 <b>7</b> ee 610et 610et 100e
Principal Place	e of Business	Mailing Address					
% WILLIAM D. KING  SOFT ON W. 1731 ST:  GAINESVILLE FL 32606  GAINESVILLE FL 32606					Date Incorporated or Qualified		
. Principal Pla	ace of Business	28_ Mailing Address			11/01/1989 4. FEI Number	01/31/	1 <b>995</b> Applied For
2631-A	1 N.W. 41ST ST.	262631-A N.W	· 415T 5	<i>π</i> .	59-2971727	<u> </u>	Not Applicable
Suite, Apt. #	#, GIC	Suite, Apt #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
City & State	2	City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
Zip	Country 25	Zıp <b>29</b>	Country 30		This corporation has hability for Florida Statutes	intangible tax un Yes No	ders 199 032
	9. Name and Address of Currer	nt Registered Agent	81 1	Name	10. Name and Address of New R	egistered Agent	
	NG, WILLIAM D.				ess #20 Box Number is #lot Accepta		
	NNESVILLE FL 32606		83	2631	ess /P.O. Box Number is /int Accepta	7+	
				Dity		85	Zip Code
					oration submits this statement for the p	FL	
agent Far	m familiar with, and accept the oblig Signature types or polled range of dystered ag-	ations of, Section 607.0505, Flo	intriorized by the bridge Statutes  It Begistered Agents  13.		on's board of directors. Thereby accep ed when ৰেণ্ডানিড্ৰী ADDITIONS/CHANGES TO OFFI	DATE:	
ILE	TS OFFICENS AIX	DELETE	1 1 THTLE		ADDITIONS/CHANGES TO OFF		nange Addition
IAME STREET ADDRESS	KING, WILLIAM D. 2622 NW 27TH PLACE		1.2 NAM€ 1.3 STREET ADI	nerse			
ITY - ST - ZIP	GAINESYILLE FL		1.4 City - St - 7	1		.,	
ITLE	P	DEFELE	2 1 TITLE 2 2 NAME			[ C⊦	nange Addition
AME Treet address	SMITH, JAMES L 507 NW 39TH RD 164	n, JAMES L		DRESS			
ITY - ST - ZIP	GAINESVILLE FL	DELETE	2 4 City - ST - Z	ZIP			nange Addition
ITLE VAME	¥		3 2 NAME			L, v	as natition
TREET ADDRESS	2038 NW 3RD AVE		3 3 STREET ADI				
ITY-ST-ZIP ITLE	GAINESVILLE FL	DELETE	3.4 CITY - ST - 7 4.1 TITLE	ZIP		CI	nange Addition
NAME			4 2 NAME				
STREET ADDRESS			4.3 \$TREET ADI 4.4 CITY - ST - 2				
TITLE		DELETE	5.1 TITLE			Ci	hange Addition
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STREET ADDRESS			5 3 STREET AD				
2)1Y - ST- ZIP		DELETE	61 TITLE			C	hange Addition
CITY - ST - ZIP TITLE	İ		6.2 NAME	DATES			
TITLE NAME			6.3 STREET AC	DRESS 1			
TITLE NAME STREEY ADDRESS				1			
TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb	by certify that the information supplies	ed with this filing is voluntarily funding annual report or supplementarily	64 CITY - ST - 3	es not qua!	lify for the exemption stated in Section and accurate and that my signature sh	119 07(3)(k), Flor	rida Statutes I e legal effect as if
ITILE NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb further cei	ertify that the information indicated or der oath, that I am an officer or direc	n this annual report or supplem for of the corporation or the rec	64 CITY ST - i irnished and dos ental annua! rep- eiver or trustee :	es not qual ort is true a empowered	lify for the exemption stated in Section and accurate and thal my signature sh d to execute this report as required by	iall have the same	e legal effect as if
ITLE  STREET ADDRESS  DITY-ST-ZIP  14. I do hereb further ceimade und	ertify that the information indicated or der oath, that I am an officer or direc ame appears in Block 12 or Block 13	n this annual report or supplem for of the corporation or the rec	64CITY-ST- irnished and do ental annua! rep- eiver or trustee : nt with an addre	es not qual ort is true a empowered ss	and accurate and that my signature sh	all have the same Chapter 617 Flo	rida Statutes, and