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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Sandra B. Mortham

Principal Place of Business Mailing Address See CURRY FORD ROAD ORLANDO FL 32822 US A Principal Place of Business Mailing Address 3. Date Incorporated or Qualified 11/03/1989 11/03/1989 4. FEI Number	ist Report
Principal Place of Business 5946 CURRY FORD ROAD ORLANDO FL 32822 US 3. Date Incorporated or Qualified 11/03/1989 04/26/199	ist Report
SOURRY FORD ROAD ORIANDO FL 32822 SUITE 2300 SUITE 2300 SILANDO FL 32801-\$440)6
3. Date Incorporated or Qualified 3a. Date of La 11/03/1989 04/26/199)6
l & Datasiani Diaga ai Quainnan 2a Mailing Addrocc 4 kl. Number	Applied For
- Trinings Tibes of Business	Not Applicable
21 26 59-2977232 Suite, Apt. #, etc. 5uite, Apt. #, etc. 59-2977232	75 Additional
L Cortificato of Status Desired	e Required
City & State 6. Election Campaign Financing State Trust Fund Contribution Add	.00 May Be ded to Fees
Zip Country Zip Country 8. This corporation has liability for intengible tax und Florida Statutes Yes \(\) No	er s. 199.032,
24 25 295280/-37302 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
A.G.C. CO.,	
200 SOUTH ORANGE AVENUE 82 Street Address (P.O. Box Number is Not Acceptable)	
SUITE 2300	
ORLANDO FL 32801-3432	
84 City FL 85	Zip Code
Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent. I am familiar with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE	ng its registered it as registered
Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	TORS IN 12
TITLE DPST DELETE LETTILE CHA	
NAME TAYLOR, CHERYL 1.2 NAME	
STREET ADDRESS 5948 CURRY FORD ROAD 1.3 STREET ADDRESS	
CITY-\$T-ZIP ORLANDO FL 32822 1.4 CITY-\$1-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE DV DELETE 21 THILE	nge L Addition
NAME TAYLOR, ALAN 22 NAME	
STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32822 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP 2.5 TREET ADDRESS 2.4 CITY-ST-ZIP	
CITY-ST-ZIP ORLANDO FL 32822 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Cha	inge Addition
NAME 3.2 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4 CITY-ST-7IP	
TITLE Cha	inge L Addition
NAME 4. 2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-\$1-2IP	inge Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 54 CITY-ST-ZIP	
TITLE DELFTE 61TITLE Cha	ange Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREL1 ADDRESS	
CITY-ST-ZIP 14. I do hereby certify that he information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(t), Florida Statutes. I further certify the property of the exemption information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(t), Florida Statutes. I further certify the property of the exemption of the e	that the

I am an officer or piroctor of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Biot 13 if changed, or on an attachment with an address.

4/4/97

407-273-8770