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

DOCUN		# L3764	12	(0)							
1. Corporation F.J.B.,									A TORNERI ARE HINTE MARIE RITH REAL MARIE AND REAL MARIE AND	1	
			·								
Principal Place				g Address							
387 SE 90TH ST. OCALA FL 34480				387 SE 90TH ST. OCALA FL 34480							
US	-		U\$						3. Date Incorporated or Qualified 3a. Date of Last Report	— _I	
									12/18/1989 05/01/1995		
2. Principal Pla	— — — — — — — — — — — — — — — — — — —			. Mailing Address					4. FEI Number Applied For 59-2989643 Not Applied		
21 Suite Apt #	Suite Apt # etc				Suite, Apt. #, etc.				59 -2989043 Not Applicate	ile	
Suite, Apt. #, etc. 27				barto, Apr. 11, oto.					5. Certificate of Status Desired Fee Required		
City & State				City & State					Election Campaign Financing S5.00 May Be Added to Ford Added to Ford		
23 28				7-					Tibst rund Contribution Added to rees		
Zip 24	Country 29		<u> </u>	Zip Count				B. This corporation has liability for intangible tax under si 199.032, Florida Statutes Yes No			
	9. Name	and Address of Curr		ed Agent					10. Name and Address of New Registered Agent		
					81			me			
BRICKEY, FRANK J.							Str	Street Address (P.O. Box Number is Not Acceptable)			
387 SE 90TH ST. OCALA FL 34480						83					
OUNLA	1 6 07700								lan Liva Coda	_	
						84	-	•	FL 85 Zip Code		
11. Pursuant to	o the provisi	ons of Sections 607.05	02 and 607.1	508, Florida Statut	es, the at	oove-r	name oratio	d corpora	ation submits this statement for the purpose of changing its registered of d of directors. I hereby accept the appointment as registered agent. I am	ice	
familiar with	h, and acce	pt the obligations of, Se	otion 007:030	05, Florida Statutes	3.				11.001		
SIGNATURE	Slorature then	or printed name of registered ag	ent and title if add	cable. (NC	OTE: Register	red Ager	il signa	iture required	d when reinstating: 4-29-96 DATE		
12.	7		ND DIRECTO)RS	13				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	\sqsupset	
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NAME		EY, FRANK J.				NAME				- }	
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STREET ADDRESS						STREET		<u> </u>			
CITY-ST-ZIP	L v certify that	the information supplie	d with this filir	ng is voluntarily fur	nished an	id doe	s no	qualify fo	or the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	\dashv	

certify that the information supplied what this limiting is voluntiality furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an officer or director 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 Block 13 if changed, or on an attachment with an address.

Buch FRANK BRICKEY 4/29/76

352 237 9/52 Daytinic Phone #