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

Solida Anti R, side. Solida Anti R, side. Solida Anti R, side. Solida Control Solida Desired Solida Desired Solida Control Solida Desired Solida Control Soli	1. Corporation	MENT # L382	31	(1)				1 10 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1	111 2 7 1181 3 182		(8
8 CREEKSBRIDGE CT. ORMOND BEACH FI. 32174 2 International Pose of Business 2 International Pose of Business 3 International Pose o	Principal Place of	of Business	Mailing A	ddress							E
SHILLD BEACH FL 32174 ORMOND BEACH FL 32174 S. Date incorporated or Custillate 12 Vising Authorox 28 Suite, April *, oth 29 Suite, April *, oth 20 Suite, April *, oth 21 Suite, April *, oth 22 Suite, April *, oth 23 Suite, April *, oth 24 Suite, April *, oth 25 Suite, April *, oth 26 Suite, April *, oth 27 Suite, April *, oth 28 Suite, April *, oth 29 Suite, April *, oth 20 Suite, April *, oth 21 Suite, April *, oth 22 Suite, April *, oth 23 Suite, April *, oth 24 Suite, April *, oth 25 Suite, April *, oth 26 Suite, Suit			C/O	RAYDELL BREN	IEMAN						
2. Principal Piece of Business 2. A Moring Astrony. 2. Principal Piece of Business 3. A Moring Astrony. 3. Col. 1, 4 (etc.) 3. Suite, Apt. 4, etc. 3. Suite, Apt											
2. Surface of Business Surface Appl. #, etc.	OHMOND D	Choir is being	Олм	DINO DEMONIFIL	. 32174				1		
Surte, April 9, etc. 20	2. Principal Plac	ce of Business	2a. Mailin		····						
Suite, April 8, etc. 2			h	g / tacheo.						· · · · · ·	Not Applicab
Toy A State 27		, etc.	F1	Apt #, etc.				5. Certificate of Status Desired			
Section Sect				State				6 Floation Convenien Francisco			
Section Sect	— '		├ ─-,	Oldre							
BRENEMAN, RAYDELL 6 CREEKSBRIDGE CT. ORMOND BEACH FL 32174 83 84		⊢				ntry		1	-		
BRENEMAN, RAYDELL 6 CREEKSBRIDGE CT. ORMOND BEACH FL 32174 84 City FL 85 City FL 86 City FL	4			Agent	30			· ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		Acont	
6 CREEKSBRIDGE CT. ORMOND BEACH FL 32174 84 City FL 85 Zo Code 44 City FL 85 Zo Code 45 City FL 85 Zo Code 46 City FL 85 Zo Code 47 City and Code the Code of Fronts. Such change was authorized by the copporation's broard of directors. I havely accept the appointment as registered agent. I change was authorized blothus. 80 John School Schoo		V. 1-4110 0110 1100 01 01 0110	in registered,			B1 N	lame	to. Name and Address of New I	negistered	Agent	
6 CREEKSBRIDGE CT. ORMOND BEACH FL 32174 63 64 City FL 85 Zo Code 65 City FL 85 Zo Code 67 City FL 85 Zo Code 68 City FL 86 Zo Code 68 Zo Code 69 Zo Code 60 Zo C	BRENE	MAN, RAYDELL			-	83 CB	treat Addro	es /P O Box Number o Not Accepte	bla\		
11. Pursuant to the provisions of Sections 607-0722 and 607-1508. Floridal Statuter. The debove rearned corporation submits that on the purpose of changing its registered agent, to both, in the State of Exercis. Such change was authorized by the corporation's bload of directors. Horotry ascept the appointment as registered agent. In the state of Exercis. Such change was authorized by the corporation's bload of directors. Horotry ascept the appointment as registered agent. In the state of Exercis. Such change was authorized by the corporation's bload of directors. Horotry ascept the appointment as registered agent. In the state of Exercis. Such changes are such as a su								as (i.e. dox realined is not Accepta			
11. Pursuant to the provisions of Sections 607-0522 and 607-1508, Florick Statute: the above named purporation subtracts his statement for the purpose of changing its registered agent, or both, in the State of Franck: Such change was authorized by the corporation's board of declars. Hierarchy accept the appointment as registered agent, and accept the obligations of, Section 607-0506, Florida Statutes. SIGNATURE System, best produce of the purpose of broad Statutes. SIGNATURE System, best produce of the purpose of broad Statutes. SIGNATURE System, best produce of the purpose of broad Statutes. SIGNATURE System, best produce of the purpose of the purpo	ORMON	ND BEACH FL 32174				83					
11. Pursuant to the provisions of Sections 607-6222 and 607-1508, Florics (Statuter the debuse ranked corporation submits his attender for the purpose of changing its registere or registered agent, in both, in the State of Fronti. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent familiar with, and accept the obligations of, Section 807-0506. Florids Statutes. SIGNATURE SUNTA, READ PROVIDED ACCEPTED AND DERICORS 12. OFFICERS AND DERICORS 13. ADDITIONS/CHANGES TO OFFICERS AND DERICORS 14. THILE DELETE 1 THILE PRENEMAN, RAYDELL 12. OFFICERS AND DERICORS 13. ADDITIONS/CHANGES TO OFFICERS AND DERICORS IN 1 BRENEMAN, RAYDELL 12. OFFICERS AND DERICORS 14. CHANGES 15. THILE PRENEMAN, RAYDELL 15. THE BRENEMAN, RAYDELL 15. THE BRENEMAN, RAYDELL 15. THE CHANGE 16. CREEKSBRIDGE CT. ORMOND BCH. FL VS BRENEMAN, EDNA F. 6 CREEKSBRIDGE CT. ORMOND BCH. FL DELETE 14. CHANGES 33. STREET ADDRESS 34. STREET ADDRESS 35. STREET ADDRES						84 C	ity		P* 1	85 Z	p Code
SIGNATURE SQUARM READ PRINCIPLE CHANGES CONTROL STATE AND DIFFECTORS STATE 12. OFFICERS AND DIFFECTORS IN 1 INCE P BRENEMAN, RAYDELL 17. MANE BRENEMAN, RAYDELL 17. MANE BRENEMAN, RAYDELL 17. MANE BRENEMAN, RAYDELL 17. MANE BRENEMAN, BONA F. 17. MANE BRENEMAN, BO	11. Pursuant to	the provisions of Sections 607.050	2 and 607 1508	Florid L Statute	es the above	// N201	od coroon	han cultivite has etalogical for the p	FL.		
BRENEMAN, RAYDELL BRENEMAN, BDNA F. BRENEMAN, EDNA F. BRENEMAN, ED	SIGNATURE _s	gnature, typed or printed har is of registered sym	प्राप्तान्य स्थला अनुवासको क		it Registered	Augern' Sign	arura required				
BRENEMAN, RAYDELL 6 CREEKSBRIDGE CT. 13 STREET ADDRESS DRIVE ST-ZIP ORMOND BCH. FL US BRENEMAN, EDNA F. 5 CREEKSBRIDGE CT. 23 STREET ADDRESS 6 CREEKSBRIDGE CT. 23 STREET ADDRESS 6 CREEKSBRIDGE CT. 23 STREET ADDRESS 6 CREEKSBRIDGE CT. 24 STREET ADDRESS 74 CITY ST-ZIP DELETE 3 1 THE 3 2 AME 32 AME 32 AME 33 STREET ADDRESS 34 STREET ADDRESS 35 STREET ADDRESS 36 STREET ADDRESS 36 STREET ADDRESS 36 STREET ADDRESS 37 STREET ADDRESS 38 STREET ADDRESS 38 STREET ADDRESS 39 STREET ADDRESS 39 STREET ADDRESS 40 STREET A				TT DELETE		Tri F		ADDITIONS/GHANGES TO OH			DRS IN 12
ORMOND BCH. FL 14 CIFY. 57-7P THE VS BREMAN, EDNA F. 5 CREEKSBRIDGE CT. ORMOND BCH. FL 12 2 NAME BREEF ADDRESS THY-51-7P THE AME BREF ADDRESS THY-51-7P THE DELETE 3.1 THLE 3.2 NAME 3.3 STREET ADDRESS THY-51-7P THE AME THEEF ADDRESS THY-51-7P THE DELETE 5 THLE DELETE 5 THLE 5 SAME 6	IAME	BRENEMAN, RAYDELL	'		•				L	Gridings	
INTER LADRESS BRENEMAN, EDNA F. BRENEMAN, EDNA F. 6 CREEKSBRIDGE CT. ORMOND BCH. FL DELETE 3 1 TITLE 3 2 AME INTEREL ADDRESS DITY-S1-2P INTER ADDR	STREET ADDRESS				13 STI	GCA 1336	RESS				
BRENEMAN, EDNA F. 6 CREEKSBRIDGE CT. ORMOND BCH. FL DELETE 3.1 TITLE AME IREET ADDRESS 171-51-2P DELETE 1.1 TITLE DELETE 3.1 TITLE AME 1.2 NAME 3.3 STREET ADDRESS 3.4 CHY-S1-2P DELETE 4.1 TITLE 4.2 NAMA 4.2 NAMA REET ADDRESS 171-51-2P DELETE 5.1 TITLE 4.4 CHY-S1-2P DELETE 5.1 TITLE AME 1.2 NAME 4.2 NAMA 4.3 STREET ADDRESS 171-51-2P DELETE 5.3 STREET ADDRESS 171-51-2P DELETE 5.3 STREET ADDRESS 171-51-2P DELETE 5.4 CHY-S1-2P DELETE 6.1 TITLE AME 1.2 NAME 5.3 STREET ADDRESS 171-51-2P 4.1 do hereby certify that the information supplied with this filing is voluntarily formished and does not qualify for the exemption stated in Section 119.07(3)(d), Florida Statutes I furth certify that the information indicated on this arrival report or supplier annual report is true and accurate and that my signature shall have the same legal effect as if made u oath. That the information indicated on this arrival report or supplierement annual report is true and accurate and that my signature shall have the same legal effect as if made u oath. That I am an officer or director of the corporation or the receiver or furstee or empowered to execute this report as required by Chapter 607. Florida Statutes; and that my na appears in Block 12 or Block 13 if changed, or on an attachment with an address			·				D				
## Change Ad			ļ	☐ DELETE					Ĺ	Change	☐ Addition
ORMOND BCH. FL DELETE 3.1 THLE Change Ad	-						RESS.				
AME STREET ADDRESS STR-ST-ZIP STREET ADDRESS STREET	CHTY-ST-ZIP										
TREET ADDRESS STY_ST_ZIP DELETE DELETE DELETE 3 4 CITY_ST_ZIP THE DELETE 4 1 TITLE Change Ad 4 2 NAML 4 2 NAML 4 2 NAML 4 3 STREET ADDRESS UTY_ST_ZIP THE DELETE 5 1 THE 5 1 THE 5 2 NAME 5 2 NAME 5 2 NAME 5 3 STREET ADDRESS HY_ST_ZIP THE AME THEET ADDRESS HY_ST_ZIP THE AME THEET ADDRESS THE				DELETE	3. 1 Ti	LF]	Change	Addition
AME AME AME AME AME AME AME AME											
INTE DELETE DELETE 4 TITLE Change Add AME AME AME AS STREET ADDRESS ATY-ST-ZIP DELETE 5 TITLE DELETE 5 TITLE MAME AME AME AME TREET ADDRESS TY-ST-ZIP TITLE DELETE 6 TITLE DELETE 6 TITLE Change Add Add AME TREET ADDRESS TY-ST-ZIP TITLE AME AME TREET ADDRESS TY-ST-ZIP THE AME TREET ADDRESS TY-ST-ZIP ATT ADDRESS TY-ST-ZIP A I do hereby certify that the information supplied with this filing is voruntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I furnit 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 u oath; 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 nar appears in Block 12 or Block 13 if changed, or on an attachment with an address											
AME TREET ADDRESS ATY - ST - ZIP TILE DELETE 5 * TILE MAE TREET ADDRESS TILE DELETE 5 * TILE MAE TREET ADDRESS TILE DELETE 5 * TILE Change Ad TREET ADDRESS TILE DELETE 6 * TILE AME TREET ADDRESS TILE AME 6 2 NAME 6 2 NAME 6 2 NAME 6 2 NAME 6 4 CILY - ST - ZIP 4. I do hereby certify that the information supplied with this filing is vo'untarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I furnicertify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made u oath; 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 na appears in Block 12 or Block 13 if changed, or on an attachment with an address				DELETE						Change	Addition
AME DELETE 5 * Title Change Ad	IAME				4.2 NA	Λŧ				_ •	
DELETE 5 TILLE GRAME STREET ADDRESS DITY-ST-ZIP THE DELETE 6 1 TiLLE GRAME STREET ADDRESS DITY-ST-ZIP DELETE 6 1 TiLLE GRAME GR	STREET ADDRESS				43 S1F	REET ADD	RESS				
AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS TY-ST-ZIP ANDRESS TY-ST-ZIP 4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I furth 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 u oath; 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 hall appears in Block 12 or Block 13 if change, or on an attachment with an address				C DELETE				71- 71-4		1.00	
STREET ADDRESS SITY - ST - ZIP TITLE AMME TREET ADDRESS 1TY - ST - ZIP 4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I furnicertify 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 u oath; 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 hall appears in Block 12 or Block 13 if changed, or on an attachment with an address			·						L	_1 Change	Addition
STREET ADDRESS THE DELETE 6 1.T.LEF 6.2 NAME GRAME GRAM							RESS				
AME TREET ADDRESS ITY-SI-ZIP 4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I furnicertify 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 u oath; that I am an officer or director of the coporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my has appears in Block 12 or Block 13 if changed, or on an attachment with an address	ITY - ST - ZIP										
TREET ADDRESS ITY-SI-ZIP 4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes i furnition of 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 upoath; that I am an officer or director of the coporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my has appears in Block 12 or Block 13 if changed, or on an attachment with an address				DELETE						Change	Add:tion
64 CITY_ST-ZIF 4. For hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I furth 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 u oath; 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 has appears in Block 12 or Block 13 if changed, or on an attachment with an address											
4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I furti- 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 used to 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 has appears in Block 12 or Block 13 if changed, or on an attachment with an address							1				
oath; that I am an officer or director of this amiliar report or supplication and accurate and that my signature shall have the same legal effect as if made u oath; 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 nai appears in Block 12 or Block 13 if changed, or on an attachment with an address	4. I do hereby	certify that the information supplied	with this filma is	vojuntarily furni	shed and o	oes no	t quality for	the exemption stated in Section 119	07/3)/k) Flo	rida Statut	es I further
appears in Block 12 or Block 13 if changed, or on an attachment with an address	Geruiy mac n	ue mormation indicated on this ann	Hall report of Suc	iblementa: andu	iai report is	True ar	id accurate	y and that my sonatura eball bava tha	como local	offoot on if	made under
	appears in E	Block 12 or Block 13 if changed, or	on an attachmer	it with an addre	988 988	70 IO 67	ACCORD THE	герет ва годенов ву опариег об/. Е	onua otatuIt	љ, ан и (Па	к тпу пагне
SIGNATURE: (Landell- Deneman) 4-12-96 904 672 2782	SIGNATI	IRE. (). D.11	18.	. .				4-12-96	ا لامن		- 00