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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Apr 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # L38796

(3)

THELMA DREYER & ASSOCIATES, INC.

201 N. FRANKLIN STREET SUITE 1775 TAMPA FL 33802 US		201 N. FRANKLIN STREET SUITE 1775 TAMPA FL 33802-5180 US	201 N. FRANKLIN STREET SUITE 1775 TAMPA FL 33802-5193			3. Date Incorporated or Qualified 12/28/1989 3a. Date of Last Report 05/17/1996				
2. Principal fil	ace of Business	2a. Mailing Address	2a. Mailing Address			Number	1 100/17		oplied For	
1		 	26			9-2982151			ot Applicable	
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·				Additional	
2		27			5. Cer	tificate of Status Desired			equired	
City & State)	City & State	***************************************		6. Elec	tion Campaign Financing		\$5.00	May Be	
3		28			Trus	st Fund Contribution			to Fees	
Zip Ti	Country	Zip	Countr	У		corporation has liability for			. 199.032,	
4	9. Name and Address of Cu		30				Yes 🔲 I			
		ment registered Agent	81	Name		me and Address of New Re	gistered Age	mt		
	YER, THELMA H.			TALLTIC						
	N. FRANKLIN STREET		82 Street Address (P.O. Box Number is Not Accept			ole)				
	TE 1775		83	 						
LAM	IPA FL 33602					•				
			84	City			FL	35 Zip	Code	
1 Forsuant t	o the provisions of Sections 607	0502 and 607.1508, Florida Statute	e the show	re-namer	d corneration sul	hmits this statement for the r		anoina il	e registeres	
agent Lar SIGNATURE	m familiar with, and accept the ol	tate of Florida. Such change was a bligations of, Section 607.0505, Flor dispers and tile flag reade: (NOTE	rida Statute)S.	are required when reinst	,	/8/9;	7		
2.	OFFICERS	AND DIRECTORS	13.		ADDI	TIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	S IN 12	
FILE	DPS	□ DELETE	1.1 TITLE					Change	Addition	
IAME	dreyer, thelma H.		1,2 NAME							
TREET ADDRESS	201 N. FRANKLIN STREET,	, SUITE 1775	1.3 STAEE	T ADDRESS	3					
TY-ST-ZIP	TAMPA FL		1.4 CITY»	ST-ZIP						
FLE		☐ DELEYE	2.1 1t7LE					Change	Addition	
IAME			2.2 NAME							
TREET ADDRESS			2.3 STAES	T ADDRESS	6					
11Y - ST - 2HP			2. 4 CITY-	ST-ZIP						
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AME			3.2 NAME							
TREET ADDRESS			3.3 STREE	T ADDRESS	6					
ITY - ST - ZIP			3.4. C(TY	ST-ZIP		·				
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IAME			4. 2 NAME							
TREET ADDRESS				t address	i					
DTY - ST - ZIP		Distre	4.4 CITY -	ST-ZIP		·		Charre	1 2250	
ITCE		☐ DELETE	5.1 TITLE				L	J Change	Addition	
IAME			5.2 NAME							
TREET ADDRESS				T ADDRESS	·					
offy-ST-ZIP		DELETE	5.4 CITY-	ST-ZIP				Change	Addition	
ITLE EP 640		f" Drrrit	6.1 TITLE					, onange	ELL AUGINOR	
TAME			6.2 NAME		. [
STREET ADDRESS				T ADDRESS	' [
11Y-\$1-7IP	w contifu that the information our	plied with this filing does not qualify	6.4 CITY-		etated in Continu	110 07/2)/i) Elasida Consus	e I fughae	phify these	the	
information Lam an of	n indicated on this annual report ficer or director of the corporatio	plied war this filling does not quality or supplemental annual report is tri n or the receiver or trustee empowe d, or on an attachment with an addi	ue and acc ered to exe	urate an	nd that my signat	ure shall have the same leos	l effect as if i	made un	der oath: tha	