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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L42997

(1)

JOHN GUTHRIE AGENCY, INC.

FILED Feb 12 1997 8:00am Secretary of State

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Principal Place of Business	Mailing Address		j indiiatil tit dibis nibis salta sibit sant a		
	C/O JOHN GUTHRIE				
1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	110 E BAY DR				
LARGO FL 34640 L	ARGO FL 33770-2533		3. Date Incorporated or Qualified 01/11/1990	3a. Date of Last R	eport
2. Principal Flace of Business 2	a. Mailing Address		4. FEI Number		plied For
21 20	6		59-2993307	No	t Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 / Fee Re	
City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23 24		***************************************	Trust Fund Contribution	Added 1	
Zip Country	¬ ^Z Ф	Country	8. This corporation has liability for in		199.032,
24 25 25 29. Name and Address of Current Reg		30	Florida Statutes 10. Name and Address of New Reg	Yes No	
	Jistereo Agent	81 Name /	N. S. 7. 11	listered Agent	
GUTHRIE, JOHN			TUJARIE JOHA	<u>, </u>	
1110 E BAY OR NO SOUCH	-	82 Street Add	ress (P.O. Box Number is Not Acceptable	Mu Dan	/. ~
/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		B3	110 EAST 13	AND DICK	(E
LARGO FL 34640		63		·	
		84 City	A A A	- 85 Zip 9	Code
		<u></u>	MILYO	FL 37	5770
11. Pursuant to the provisions of Sections \$ 7.0.302 and office or registered about in the State of Flo	f 607 508, Florida Statutes orida Such change was au	s, the above-named corp	poration submits this statement for the pution's board of directors. I bareby accept	urpose of changing it	s registered registered
11. Pursuant to the provisions of Sections \$2.7.0002 and office or registerey apen, or both, in the Stuty of Fig. agent. I am familiar with land accept indicabilitations	of, section 607.0505, Flor	ida Statutes.	morro pool of anothers, thereby decop-	1 1 6	-1
SIGNATURE - // V/W / Y W	9mm	•		25.9	/
Stgnature, type for provide name of registered agent and		Registered Agent signature requi		DATE	T
12. OFFICERS AND DIF		13.	ADDITIONS/CHANGES TO OFFICE		
TRUE PST	DELETE	1.1 TITLE		Change	Addition
NAME GUTHRIE, JOHN C		12 NAME			
STREET ADDRESS 1110 E BAY DR		1.3 STREET ADDRESS			
City-ST-ZIP LARGO FL 33	T an ere	1.4 CITY-ST-ZIP		T 1 A.	1 4 4 4 9 3
TITLE	DELETE	2.1 TITLE		Change	L Addition
NAME		2.2 NAME			
STREET ADDRESS	•	2.3 STREET ADDRESS			
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NAME		3.2 NAME			
STREET ADORESS		3.3 STREET ADDRESS			
CITY-ST-ZIP	1 55.555	3 4. CITY-ST-ZIP	·		
TIFLE	☐ DELETE	4.1 TITLE		Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-7P	1	4.4 CITY - ST - ZIP		1-1 2:	
TIFE	☐ DELETE	5.1 THTLE		Change	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY+SF-ZIP		54 CITY-ST-ZIP			
TITLE	☐ DELETE	61 TITLE		Change	Addition
NAME		62 NAME			
STREET ADDRESS		63 STREET ADDRESS			
CiTY-SI-ZiP		6.4 CITY - ST - ZIP			

I do hereby certify that the information supplied with this fulling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this affair reporter supplier ontal annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the required 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 planting or on all little iment with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2-3-97 813-585.5252

me Phone #

(9/34 (9/96)