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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L56545

(1)

NANSEP CORPORATION

Principal Place of Business 13901 US HWY ONE JUNO BEACH FL 33408

Mailing Address

13901 US HWY ONE JUNO BCH L 33406-1613

FILED Feb 19 1997 8:00am Secretary of State



US		US							
						3. Date Incorporated or Qualified 03/08/1990		e of Last 1/1996	Report
2. Principal F 21 800	Place of Business OCEAN DRIVE	28. Mailing Address 26. 800 0 C	EAN	PRI	VE	4. FEt Number 65-0175207		h	pplied For lot Applicable
Sulte, Apt. 5T £	S PH 1	Suite, Apt. #, etc.				5. Certificate of Status Desired	ÞØ	\$8.75	Additional lequired
City & Sta	VO BEACH FL	City & State		neu t	~,	6. Election Campaign Financing			May Be
Zip	Country	28 JUNO 210 33408	BEI	107 F	56	Trust Fund Contribution	<u> </u>		to Fees
24 33	408 25 0 9	29 33408 T	Count	19		8. This corporation has liability for Florida Statutes	intangible t Yes		s. 199.032,
	9, Name and Address of Current F	legistered Agent				10. Name and Address of New R			
	HARA, PATRICK M.		8	1 Name					
	DATURA STREET		8:	Stroot A	ddros	s (P.O. Box Number is Not Accepta	<u> </u>		
	ITE 100]*	SHEELA	wures	s (F.O. box Number is not Accepta	Die)		
WE	ST PALM BEACH FL 33401		8:	3					·
			84	City				85 Zip	Code
	to the provisions of Sections 607,0502 a registered agent, or both, in the State of am familiar with, and accept the obligatio				corpor	ation submits this statement for the last board of directors. I hereby acce	FL purpose of c pt the appoi	hanging i Intment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (NOTE	Registered Ad	eel signature n	equired	when reinstating)	DATE		
12.	OFFICERS AND D		13.	, , , , , , , , , , , , , , , , , , , ,		ADDITIONS/CHANGES TO OFFIC		DIBECTOR	RS IN 12
TITLE	DVS	DELETE	1.1 TIFLE	I				Change	☐ Addition
NAME	SEPPALA, NANCY		1.2 NAME	}			-		
STREET ADDRESS				1.3 STREET ADDRESS 800 OCEAN PRIVE STA 1.4 CITY ST-7 P JUNO BEACH FL 33				TE P	HZ
CITY-ST-ZIP	JUNO BEACH FL		1.4 CITY-	ST-7IP	سا ز	INO BEACH	KL 3	340	8
TITLE	DPT	DELETE	2.1 1ffLE				- 2	Change	☐ Addition
NAME	SEPPALA, MARTIN H.		2.2 NAME						4
STREET ADDRESS	13901 UW HWY ONE STE ONE JUNO BEACH FL		2.3 STREE	T ADDRESS	86		IE 57	E PI	H 4
CITY-ST-ZIP	V JUNU DEAUN PL		2. 4 City-	ST-ZIP	J <i>u</i>	NO BEACH F	6 33	2406	5
TITLE	SARKELA, RODNEY	☐ DELE1E	3.1 TITLE	1			. L	Change	Addition
NAME	13901 US HWY ONE STE ONE		3.2 NAME	[TT	Δ IJ 1.
STREET ADDRESS	LANTANA FL			T ADDRESS	80	O OCEAN DRI	VE S		F
CITY-ST-ZIP TITLE	BWINWITE	DELETE	3 4. CITY-	ST-ZIP	JU	NO BEACH F	<u> </u>	3 408	<u> </u>
NAME		L DELLIC	4.1 TITLE				F	Change	Addition
STREET ADDRESS			4. 2 NAME			·			
CITY-ST-ZIP				I ADDRESS					
TITLE		DELETE	4.4 CITY - : 5.1 TITLE	51-211			-	Change	(Addison
NAME			5.2 NAME				L	"I chands	☐ Addition
STREET ADDRESS			5.3 STREET	TANDRESS					
CITY-ST-ZIP			5.4 CITY-5	1					
TITLE		DELETE	6.1 TITLE	Z1 ER				Change	Adcition
NAME			6.2 NAME				_	No	raction
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP			64 CITY. S	T. 71P					
14. I do hereb information I am an of appears Ir	by certify that the information supplied win indicated on this annual report or supplificer or director of the corporation or the n Block 12 or Block 13 if changes, or on	th this filing does not qualify i demental annual report is true receiver or trustee empower an attachment with an addre	lar III.a. aa		ted in nat my port as	Section 119.07(3)(i), Florida Statute r signature shall have the same lega s required by Chapter 607, Florida S	s. I further of l effect as if tatutes; and	ertify that made und that my n	the der oath; that ame

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13901 US HWY ONE JUNO BCH L 33406-1613



US		US							
						3. Date Incorporated or Qualified 03/08/1990 3a. Date of Last Report 05/01/1996			
2. Principal P	Ace of Business OCEAN DRIVE	28. Mailing Address 26 800 0 C	EAN	DRI	UE	4. FEt Number 65-0175207		Applied For Not Applicable	
Sulte, Apt. 22 5 T &	#, etc.	Suite, Apt. #, etc.	17	Phy		5. Certificate of Status Desired	Þ	\$8.75 Additional Fee Required	
City & State	10 BEACH FL	City & State 28	REA	ICH F	ټ/.	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 🦫	408 Country () 5	Zip > > 1600	Countr	× ~	-	This corporation has liability for its corporation and its liability for its li	intangible f		
24 35	25	Zip 33408 Country 5				Florida Statutes Yes No			
	9, Name and Address of Current I	legistered Agent	81	Nome		10. Name and Address of New Registered Agent			
	IARA, PATRICK M.		*'	81 Name					
SUITE 100 WEST PALM BEACH FL 33401				Street A	reet Address (P.O. Box Number is Not Acceptable)				
			84	l City				85 Zip Code	
44 5		1007.4500.51					<u> </u>		
11. 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 its registered office or registered agont, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOTE	Registered Ap	eni signature	required	when reinstaling)	DATE		
12.	OFFICERS AND I		13.			ADDITIONS/CHANGES TO OFFIC		DIBECTORS IN 12	
TITLE	DVS	☐ DELETE	1.1 TIFLE				1	Change Addition	
NAME	SEPPALA, NANCY		1.2 NAME	1					
STREET ADDRESS	13901 US HWY ONE STE ONE		1.3 STREE	T ADDRESS	80	O OCEAN PRI	VE S	TETAL	
CITY-ST-ZIP	JUNO BEACH FL		1.4 CiTY-	ST-7 P	<u>al (</u>	INO BEACH	FL.	53400 E	
TITLE	SEPPALA, MARTIN H.	☐ DELET E	2.1 THLE	1			1	Change	
NAME	13901 UW HWY ONE STE ONE		2.2 NAME		86	O OCEAN DRIV	1C C	TE PH2	
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CITY-ST-ZIP TITLE	V	DELETE	2.4 CITY - 3.1 TITLE	SI-ZIP	V	NO BENCH F	<u>ک</u> م	Change Addition	
NAME	SARKELA, RODNEY		3.2 NAME	1				1	
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CITY-ST-ZIP	LANTANA FL		34. C/TY-		Ju	NO BEACH F	L 3	3408	
TITLE		DELETE	4.1 10 LE					Change Addition	
NAME			4. 2 NAME	.]		i e			
STREET ADDRESS			4.3 STREE	t address					
CITY-ST-ZIP			4.4 CITY	ST-2IP					
TITLE		DELETE	5.1 TITLE	Ţ				Change Addition	
NAME	·		5.2 NAME					İ	
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-	ST - ZiP	,		·	Change Adcition	
NAME		ניי) מנונונ	6.2 NAME	\			ı	T ORKURE T MACKION	
STREET ADDRESS				1 ADDRESS					
CITY-ST-ZIP			6.4 CITY-						
0111-91-5H	77 6 40 17	24 0 42	0.4 GHT	01-21		C 440 07(0)(1) CL (0)			

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 oath; that I am an officer or director of the corporation or tho receiver or trustee mpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charties, or on an attachment with an address.

appears in block 12 of block 13 if Charget, or off an attachment with an ac