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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L60569

(5)

Mailing Address

DAVID GEORGE RONDEAU P.A.

FILED Mar 13 1997 8:00am Secretary of State

% DAVID RONDEAU 1121 HONEYSUCKLE LANE LARGO FL 34840		% DAVID RONDEAU 1121 HONEYSUCKLE LANE LARGO FL 33770-4236				l de Dan el less D	
					3. Date Incorporated or Qualified 03/22/1990	3s. Date of Last R 05/01/1996	eport
	lace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
21		26			59-3000158		t Applicable
Suite, Apr.	•	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	□ \$8.75 / Fee Re	
City & Stat 23	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip 24	Country Zip Co 25 29 30			try	This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Agent	
RON	Deau, David			B1 Name	•		
1121 HONEYSUCKLE LANE LARGO FL 34840			L		Address (P.O. Box Number is Not Acceptab	ile)	
],	B3			
				B4 City		FL	Code
office or I	to the provisions of Sections 607. registered agent, or both, in the Si am familiar with, and accept the ob	ale of Florida, Such change was a	authorizéd	by the con	corporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changing it the appointment as	s registered registered
SIGNATURE							
	Signature, typod or printed name of registered	Lagent and tire if applicable (NOT AND DIRECTORS	E: Registered	Agent signature	required when reinstating) ADD/TIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTOR	S IN 12
12.	I D	DELETE	1.1 TH	E	7,5571010,01711020 10 01710	☐ Change	Addition
NAME	RONDEAU, DAVID		1.2 NAM				
STREET ADDRESS	1121 HONEYSUCKLE LANE		1.3 STR	FET ADDRESS			
CITY-ST-ZIP	LARGO FL		1.4 CIT	Y-ST-ZIP			
TITLE	DELETE			.E		Change	☐ Addition
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 STF	EET ADDRESS			
CITY-ST-ZIP				Y - ST - ZIP			T 4 (48)
TITLE		☐ DELETE	3.1 7111			Change	☐ Addition
NAME			3.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		DELETE		Y-ST-7IP		Change	Addition
TITLE		Detele	4.1 101			C Outside	
NAME			4 2 NA		1		
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5 1 TIT	Y-ST-ZIP		Change	Addition
			5.2 NAI				
NAME STREET ADDRESS				REE1 ADDRESS			
				Y-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	6.1 1IT			Change	Addition
NAME			6.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y- \$1-ZIP			
VIII.91.78			0.4 (1)	r Strait	1 1 1 (0 - c - 440 07(0)() Fig. 2 - 0(-44)	- 1 6 male	45.0

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 eath; 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 if an attachment with an address.

3/10/97

312-593-0744