## 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

FILED
Jun 18 1997 8:00am
Secretary of State

1. Corporatio	e of Business  A. BABCOCK RIVE	Mailing Address C/O THOMAS A. BABCOCI 261 MARINA ORIVE FORT PIERCE FL 34949-88			
101111111111111111111111111111111111111				3. Date Incorporated or Qualified 04/23/1990	3a. Date of Last Report 05/01/1996
2. Principal P	Place of Business	2a. Mailing Address 26		4. FEI Number 65-0198621	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stato		Cily & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 Mey Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for in	
,241	9. Name and Address of Currer		[30]	10. Name and Address of New Reg	
261	COCK, THOMAS A. MARINA DRIVE IT PIERCE FL 34949		83	ress (P. <del>O. Bex</del> Number is Not Acceptabl	
			84 City		FL SS Zip Code
SIGNATURE	Signature, typod or printed name of registered ag OFFICERS AN	~h	uniforized by the corpora prida Statutes.  Registered Agent signature requ  13.		/11/97 DATE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BABCOCK, THOMAS A. 261 MARINA DRIVE FORT PIERCE FL	☐ DELETE	1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP		Change Addition
TITLE NAME STREET ADDRESS	D BABCOCK, THOMAS A. 261 MARINA DRIVE FORT PIERCE FL	☐ DECETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1 div (inion) in	☐ DELETE	2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	3.4. CITY-S1-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	4.4 CHY-ST-ZIP 5.1 THLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-S1-ZIP		DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CHY-SI-ZIP		Change Addition

14. 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 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 on an attachment with an address.

SIGNATURE:

Thomas A. Babcock 4/11/97