COF ANNL	PROFIT RPORATION JAL REPORT 1996	Sandr Secre	PARIMENT OF STATE a B Mortham plary of State F CORPORATIONS		
DOCUI 1. Corporation SISIS,		486 (3)		i Nadilali ani laati madi alaas hiika	
Principal Place 4827 PHILLIPS JACKSONVILL	S HWY	Mæling Address 4827 PHILLIPS HWY JACKSONVILLE FL 327	207	Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		05/30/1990 4. FEI Number	01/03/1996
21		26 Prize in g 7/2/3/635		NOT APPLICABLE	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc		5. Gertificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Zip		Crty & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country 25	Zip [29]	Country 30	8. This corporation has liability for in Florida Statutes Yes	
	9. Name and Address of (Current Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
	S, KEVIN S.			ess (P.O. Box Number is Not Acceptabl	(0)
	AUGUSTINE ROAD NVILLE FL 32207		83	The control of the coopiasi	ic)
			84 City		
11. Pursuant te	o the provisions of Sections 607	2 0502 and 607 1508. Florida Statut	'	ation submits this statement for the purp	FL 85 Zip Code
		of Florida, Such change was authorial Section 607.0505, Florida Statutes		ation submits this statement for the purp id of directors. Thereby accept the appo	pose of changing its registered office pintment as registered agent. I am
SIGNATURE	Signature, typed or prime in during thingesters	of a point and time it apportants. (No.	Mr. Hopstered April separt recreations	and the second states	
12.		RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
NAME	HARGREAVES, R. A.	DELETE	1 FTULE 12 NAME		CERS AND DIRECTORS IN 12 Change Addition
STREET ADDRESS	46 CASTLE ROAD		1.3 STREET ADORESS		
CITY-ST-ZIP TITLE	UNITED KINGDOM	⊢ () () () () () () () () () () () () ()	14 C/TY - \$T - Z'P		
NAME	HARGREAVES, J. W.	DELETE	2 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS	RODE HEATH FARM		2.3 STREET ADORESS		
CITY-ST-ZIP TITLE	UNITED KINGDOM	[] DELETE	2 4 CITY - ST - ZIP		
NAME			3 1 TIIL€ 32 NAME		Change Addition
STREET ADDRESS			33 STREET ADDRESS		
CITY - ST - ZIP TITLE		Floring	3.4 CITY-ST-ZIP		
NAME		DELETE	4 1 TITLE 4 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS	•	
CITY - ST - ZIP		F3 propri	4.4 CITY - ST - ZIP		
TITLE NAME		DELETE	5 1 TITLE 52 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
NAME		DELETE	6 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY - ST - ZIP			64 003 - 51 - 712		
oath; that I	am an officer or director of the	nlied with this filing is voluntarily furn annual report or supplemental anni corporation or the receiver or truster t, or on an attachment with an addr	shed and does not qualify for ual report is true and accurate	r the exemption stated in Section 119.0 e and that my signature shall have the s report as required by Chapter 607, Fior	7(3)(k), Florida Statutes, I further ame legal effect as if made under ida Statutes, and that my name
SIGNAT	URE: $\mathcal{L}\mathcal{D}\mathcal{L}$	ED ON RINTED NAME OF SIGNING OFFICE		4.11-96	Duytine Privine k