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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L90711

(7)

RICHARD M. GORMAN, P.A.

FILED										
Apr	11	1997	8:00am							
Se	cre	tary c	of State							

Principa: Plac 2614 N TAMIAN		Mailing Address 2614 N TAMAMI TRAIL								
STE 330 NAPLES FL 33040 US		STE 330 Naples Fl 34103-4409 US								
					3. Date Incorporated or Qualified 07/27/1990					
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			oplied For	
21		26				59-3021088			ot Applicable	
Suite, Apt		Suite, Apt. #, etc.			Certificate of Status Desired See Required Fee Required					
City & State	υ	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	+ ·		Country		This corporation has liability for it				
24 3410	3 25	29	30				Yes J		. 100.002,	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered /	Agent		
	MAN, RICHARD M.			81	Name					
	n tamiami trail		1	82	Street A	ddress (P.O. Box Number is Not Acceptab	le)	·····		
STE			Ļ	83						
NAM	LES FL 33940			03						
			Ī	84	City		FL	85 Zip (Code	
l office or r	to the provisions of Sections 607-0502 registered agent, or both, in the State of infamiliar with, and accept the obligation of the obliga	if Florida. Such change was ions of, Section 607.0505, Fl	authorized Iorida Statu	by ites	the corpo i.	corporation submits this statement for the poration's board of directors. I hereby acceptions when relinstating)	ot the app	changing it ointment as	is registered registered	
12.	OFFICERS AND		13.		, any management	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12	
TITLE	P	☐ DELETE	1.1 TITU	.E				Change	Addition	
MAME	GORMAN, RICHARD M.		1.2 NA)	ΜE						
STREET ADDRESS	2814 N TAMIAMI TRAIL, STE 330)	1.3 STR	EET ,	ADDRESS					
CHT-ST-ZIP	NAPLES FL		1.4 CiT		T-Z#P					
TITLE		L DELETE	21 1111					L. Change	Addition	
NAME OTOTOT ADDITION			2.2 NAM		1000000					
STREET ADDRESS CUTY STAZIR			2.3 STR 2. 4 CiT		ADDRESS					
THEE		DELETE	3.1 Titl	_	1-211			☐ Change	Addition	
NAME			3.2 NAM	ИE						
STREET ADDRESS			3.3 STR	EET /	ADDRESS					
C-TY - ST - Z/P			3.4. CIT	Y-5	T-ZIP					
TITLE		DELETE	4.1 T (T)	.E				Change	Addition Addition	
NAME			4. 2 NA							
STREET ADDRESS					ADDRESS					
CHY-S1-70° Tifté		DELETE	4.4 CIT		r- ZIP			Change	Addition	
NAME		בן טנננונ	5.1 TITE 5.2 NAM					LI CHARGE	F"' NORTHOR	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 CITY			V •				
1/1.F	THE RESIDENCE OF THE PERSON OF	DELETE	6.1 TITL		***		,	Change	Addition	
NAME			6.2 NAN	ΛE		· · · · · · · · · · · · · · · · · · ·		-		
STREET ADDRESS			6.3 STR	EE7 /	ADDRESS	· · · · · · · · · · · · · · · · · · ·				
CHTV - ST - ZIP			6.4 CIT	Y - \$T	r-zip					
informatio Fam an of	n indicated on this annual report or sur	pplemental annual report is: ne receiver or trustee empoy	true and ac vered to ex	CUI	rate and t	ated in Section 119.07(3)(i), Florida Statutet hat my signature shall have the same lega port as required by Chapter 607, Florida S	i effect es	: if made und	der oath that	

MININE M. GORMAN, Pacs 4/7/96 800-805-9076