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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # M22416

(5)

| B.J. TUI             |  | Mailing Address       |  |   |                                   |
|----------------------|--|-----------------------|--|---|-----------------------------------|
| JUPITER FL 3         |  | JUPITER FL 33458-8107 |  |   |                                   |
|                      |  |                       | ·<br>·   |   | ate of Last Report<br>/01/1996    |
| 2. Principal P       | lace of Business   | 2a. Mailing Address   |  | 4. FEI Number 59-2602300  | Applied For<br>Not Applicable     |
| Suite, Apt           | #, etc.  | Suite, Apt. #, etc.   |  | 6. Certificate of Status Desired  | \$8.75 Additional<br>Fee Required |
| City & Stat          | 6  | City & State          | · · · · · · · · · · · · · · · · · · ·            | 6. Election Campaign Financing Trust Fund Contribution  | \$5.00 May Be<br>Added to Fees    |
| Ζιρ<br><b>24</b>     | Country<br>25  | Zip                   | Country<br>30                                    | 8. This corporation has liability for intengible Florida Statutes   | e tax under s. 199.032,           |
|                      | 9. Name and Address of Curre   |                       |  | 10. Name and Address of New Registered  | Agent                             |
| ARN                  | NELL, JAMES  |                       | 81 Name  |   |                                   |
|                      | S HAMPTON DRIVE<br>ITTER 33458   |                       | 82 Street Add                                    | dress (P.O. Box Number is Not Acceptable)   | :                                 |
|                      |  |                       | 84 City  | <u> </u>  | 85 Zip Code                       |
| office or agent. I a | registered agent, or both, in the State am familiar with, and accept the oblig |                       | s authorized by the corpore<br>Florida Statutes. | rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appured when reheating)  DATE | pointment as registered           |
| 12.                  | OFFICERS AN  | ID DIRECTORS          | 13.  | ADDITIONS/CHANGES TO OFFICERS AN  | D DIRECTORS IN 12                 |
| TITLE                | D  | DELETE                | 1.1 TITLE  |   | Change Addition                   |
| NAME                 | ARNETT, JAMES  |                       | 1.2 NAME   |   |                                   |
| STREET ADDRESS       | 173 S HAMPTON DRIVE JUPITER FL   |                       | 1.3 STREET ADDRESS                               |   |                                   |
| CITY-ST-ZIP<br>TITLE | VP   | DELETE                | 1.4 CITY-ST-ZIP<br>2.1 TITLE                     | ······································  | Change Addition                   |
| NAME                 | ARNETT, BARBARA  | La percia             | 2.2 NAME   |   |                                   |
| STREET ADDRESS       | 173 S HAMPTON DRIVE  |                       | 2.3 STREET ADDRESS                               |   |                                   |
| CITY-S1-7/P          | JUPITER FL   |                       | 2.4 CITY-ST-ZIP                                  | 4.5   |                                   |
| THUF                 |  | ☐ DELETE              | 3.1 TITLE  | -   | Change Addition                   |
| NAME                 |  |                       | 3.2 NAME   |   |                                   |
| STREET ADDRESS       |  |                       | 3.3 STREET ADDRESS                               |   |                                   |
| CITY - S1 - ZIP      | ]  |                       | 3.4. CITY-ST-ZIP                                 |   |                                   |
| TITLE                |  | DELETE                | 4.1 TITLE  |   | Change Addition                   |
| NAME                 |  |                       | 4. 2 NAME  |   |                                   |
| STREET ADDRESS       | J  |                       | 4.3 STREET ADDRESS                               |   |                                   |
| CITY - ST - ZIP      |  |                       | 4.4 CITY-ST-ZIP                                  |   |                                   |
| TITLE                |  | DELETE                | 5.1 TITLE  |   | Change Addition                   |
| NAME                 | 1  |                       | 5.2 NAME   |   | •                                 |

6.4 CITY-ST-ZIP

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.

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

54 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE

STREET ADDRESS

STREET ADDRESS CITY-S1-ZIP

CITY-\$1-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4/1/97 744-945

Change

Addition

**FILED** 

Apr 08 1997 8:00am

Secretary of State