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

**PROFIT** CORPORATION ANNUAL REPORT

1997

NAME

STREEL ADDRESS

CITY - \$1 - ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name

(7)

FRED BI	unn associates, inc	j,									
	k stewart bunn Gers Circle, suite 10	C/O FREDERIO 6451 EAST ROO	Mailing Address  C/O FREDERICK STEWART BUNN  8451 EAST ROGERS CIRCLE, SUITE 10  BOCA RATON FL 33487-2601				T 18818814 111 65814 BIEDS TIBUT 1885 UEBY BIBUT BUBY BIBUT BUBY DIBUT DIBUT DIBUT BIBUT BUBY BIBUT BUBY BUBY				
							<ol> <li>Date Incorporated or Qualified 12/31/1986</li> </ol>		ate of Last Re 01/1996	eport .	
2. Principal P	ace of Business	2a. Mailing Ad	2a. Mailing Address			7	4. FEI Number		Apr	plied For	
21	·	26	the state of the s				59-2750488		<del></del>	t Applicable	l
Suite, Apt	#, etc.	Suite, Apt.					5. Certificate of Status Desired		\$8.75 A Fee Re		
City & State	)	City & State	City & State				6. Election Campaign Financing \$5.00 May Be				
23		28					Trust Fund Contribution Added to Fees				
Zφ	Country	Zıp	<del></del>	Country	,	4	<ol> <li>This corporation has liability for</li> </ol>			199.032,	
24	25	29						Yes [			ļ
	9. Name and Address of C	urrent Hegistered Ageni		81	Name	11	g. Name and Address of New Ro	Sisteleo 1	Agent		ł
	IN, FREDERICK STEWART			61	INATITE						l
	I E ROGERS CIRCLE			82	Street A	ddress (	(P.O. Box Number is Not Accepta	ble)			l
	TE #10 CA RATON FL 33487			83	·			<del></del>			l
			•	84	City	<del></del>		FL	85 Zip C	Code	
11, Pursuant office of r	to the provisions of Sections 60 egistered agent, or both, in the	07.0502 and 607.1508, Flo State of Florida. Such cha	rida Statutes, thange was autho	e above	e-named o the corpo	orporati oration's	ion submits this statement for the board of directors. I hereby acce		changing its cintment as	s registered registered	
SIGNATURE										<u></u>	l
	Signature: Iqued or profled name of registr				ent signature ri	equired wh	en reinstating)	DATE	NO COTOC	20.111.40	┨
12.	DP OFFICER	IS AND DIRECTORS		13. 1.1 TITLE			ADDITIONS/CHANGES TO OFF	CENS AND	Change	Addition	1
NAME	BUNN, FREDERICK STEV			1.2 NAME					C Ollowed	Trocalion	ľ
STREET ADDRESS	22067 GRENWICH COUR				ADDRESS						ľ
1	BOCA RATON FL	! <b>!</b>			1					1	ľ
CITY-ST-ZIP TITLE	D DOOR HATOITE			1.4 CITY-5 2.1 TITLE	SI-ZIP				Change	Addition	ł
NAME	BUNN, FREDERICK H.	ليبا		2.2 NAME					C. O. WINDO	- Francisco	-
STREET ADDRESS	12970 ST ROAD #7				ADDRESS						١
CITY-S1-7IP	BOYNTON BEACH FL		1	2 4 CITY-	j		·			ļ	١
TITLE	D D DENOTIFE			3 1 TITLE	31-24				Change	Addition	1
NAME	BUNN, KATHLEEN H.			3 2 NAME							
STREET ADDRESS	22067 GRENWICH COUR	rΤ			ADDRESS						١
	BOCA RATON FL	l.I								ļ	ł
CITY-ST-ZIP TITLE	DOUR DATUM FL		*****	3.4. CITY - 4.1 TITLE	o) tir				Change	Addition	1
NAME				4. 2 NAME					******		
STREET ADDRESS					ADDRESS					ļ	
					- 1						
CITY-ST-ZIP TIFLE				4.4 CITY - 9 5.1 TITLE	11- EIF				Change	Addition	1
NAMÉ		<u></u>		5.2 NAME	j						
STREET ADDRESS					T ADDRESS					į	Ì
Dity - St - ZIP				5.4 CITY-S							
TITLE				6.1 TITLE	,,		<del></del>		Change	Addition	1

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 no an attachment with an address.

6.3 STREET ADDRESS