FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	470	DIVISION OF	- CORPOR	ATIONS					
1. Corporation	MENT # M654 D S. SALSER, JR. & ASS		(7) , INC.)						
	THEAST 45TH COURT	F	ng Address PO BOX 3841							
ocala fl US	34480		DCALA FL 34478 JS			3. Date Incorporated of 01/22/1988		3a . Da	te of Last R 04/21/1	
¬ '	ace of Business	\vdash	lailing Address			4. FEI Number			· · · · · ·	Applied For
Suite, Apt.	#, etc.	26 S	uite, Apt. #, etc.			59-287907				Not Applicable Additional
		27				5. Certificate of Status	Desired			Required
City & State	,	28	ity & State			6. Election Campaign Trust Fund Contribu				O May Be d to Fees
Zφ	Country	Zı	p	Cou	ntry	8. This corporation has		intangible		
4]	9. Name and Address of Curr	29	Ad 8 === 1	30		Florida Statutes		□No		
	9. Name and Address of Curr	ent Hegister	ed Agent		81 Name	10. Name and Addres	s of New I	Registered	Agent	
KREHI	L, GERARD S.					dress (P.O. Box Number is N	of Acceptal	nie)		· · · · · · · · · · · · · · · · · · ·
	W 3RD AVENUE A FL 32670				83					
OOAL	ATE OFFICE				84 City				Tabl 5	
					'			FL	_ ' ' '	p Code
or register	o the provisions of Sections 607.05 ed agent, or both, in the State of Fic th, and accept the obligations of, Se	orida. Such ch	iange was authoriz	red by the c	ve-named corp orporation's be	oration submits this statemer bard of directors. Thereby acc	nt for the pu ept the app	rpose of che pointment a	nanging its r s registered	egistered office agent. I am
or register familiar wit BIGNATURE	ed agent, or both, in the State of Fic th, and accept the obligations of, Se Signature, types or printed name of registers ago OFFICERS A	ection 607.050	nange was authoriz 05, Florida Statutes	red by the c	orporation's bo	oration submits this statemer pard of directors. I hereby acc med when minstalligh ADDITIONS/CHANG	ept the app	pointment a	s registered	agent. I am
or register familiar wit SIGNATURE 2.	ed agent, or both, in the State of Fic th, and accept the obligations of, Se Signature, types or printed name of registers ag- OFFICERS A VSTD	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes	THE Registered 1.11	Apprint signature requirements	eard of directors. I hereby acc	ept the app	DATE	s registered	agent. I am
or register familiar wit SIGNATURE 2. III.E AME	ed agent, or both, in the State of Fic th, and accept the obligations of, Se Signature, types or printed name of registers ag- OFFICERS A VSTD SALSER, FLOYD S., JR.	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes cable (NC	DTE Registered 13. 1.111 1.2 NA	Orporation's be Agent signature requ ILE	eard of directors. I hereby acc	ept the app	DATE	s registered D DIRECTO	agent. I am
or register familiar wit SIGNATURE 2. ITLE AME ITREEL ADDRESS	ed agent, or both, in the State of Fich, and accept the obligations of, Se Signature, types or printed name of registers again of FICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes cable (NC	13. 1.111 1.2 NA 1.3 ST	Aport signature result LE ME REFT ADDRESS	eard of directors. I hereby acc	ept the app	DATE	s registered D DIRECTO	agent. I am
or register familiar wit SIGNATURE	ed agent, or both, in the State of Fic th, and accept the obligations of, Se Signature, types or printed name of registers ag- OFFICERS A VSTD SALSER, FLOYD S., JR.	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes cable (NC	13. 1.111 1.2 NA 1.3 ST	Agent signature requirements ILE ME REFT ADDRESS Y-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	s registered D DIRECTO	agent. I am
or register familiar wit SIGNATURE 12. III.E III.E III.E III.E III.E III.E III.E III.E	ed agent, or both, in the state of Fich, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K.	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes cable (NC DRS	inter Registered 13. 1.1 Til 1.2 NA 1.3 STI 1.4 Cil	Aport signature requirements JLE ME REFT ADDRESS (Y-ST-ZIP)	eard of directors. I hereby acc	ept the app	DATE	s registered D DIRECTO Change	RS IN 12
or register familiar wit SIGNATURE 2. III.E AME IREE1 ADDRESS IIV-S1-ZIP III.E AME AME	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes cable (NC DRS	13. 1.11 1.2 NA 1.3 ST 1.4 CH 2.2 NA 2.3 ST	Aport signature results TLE ME REFT ADDRESS IV-ST-ZIP TLE ME REFT ADDRESS	eard of directors. I hereby acc	ept the app	DATE	s registered D DIRECTO Change	RS IN 12
or register familiar wit SIGNATURE 2. III.E AME IREE I ADDRESS IIY-SI-ZIP III.E AME TREET ADDRESS IIY-SI-ZIP	ed agent, or both, in the state of Fich, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K.	orida. Such chection 607.050	nange was authoriz DS, Florida Statutes Cable DRS DELETE DELETE	Properties of the Case of the	Aport signature results TLE ME REFT ADDRESS IV-ST-ZIP REET ADDRESS IV-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change	PRS IN 12 Addition
or register familiar wit signature 2. 2. III.E AME IREE1 ADDRESS IIY-S1-ZIP III.E AME IREET ADDRESS IIY-S1-ZIP III.E IREET ADDRESS IIY-S1-ZIP	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	nange was authoriz 05, Florida Statutes cable (NC DRS	13. 1.11 1.2 NA 1.3 ST 1.4 CH 2.2 NA 2.3 ST	Aport signature resiling Aport signature resil ILE ME REFT ADDRESS Y-ST-ZIP ILE ME REFT ADDRESS Y-ST-ZIP ILE	eard of directors. I hereby acc	ept the app	DATE	s registered D DIRECTO Change	RS IN 12
or register familiar wit SIGNATURE 2. III.E AME IREE1 ADDRESS IIY-S1-ZIP III.E AME IREET ADDRESS IIY-S1-ZIP III.E AME IREET ADDRESS IIY-S1-ZIP III.E AME AME	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	nange was authoriz DS, Florida Statutes Cable DRS DELETE DELETE	ed by the c 3. 13. 1.111 1.2 NA 1.3 STI 1.4 CH 2.1 TI 2.2 NA 2.3 STI 2.4 CH 3.1 TI 3.2 NA	Aport signature resiling Aport signature resil ILE ME REFT ADDRESS Y-ST-ZIP ILE ME REFT ADDRESS Y-ST-ZIP ILE	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change	PRS IN 12 Addition
or register familiar wit sliGNATURE	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	lange was authoriz DS, Florida Statutes CARS DELETE DELETE DELETE	ed by the c 3. 13. 1.111 1.2 NA 1.3 ST 1.4 CP 2.1 TF 2.2 NA 2.3 ST 2.4 CP 3.7 TF 3.2 NA 3.3 ST	Aport signature resistance resist	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change	PRS IN 12 Addition
or register familiar wit signature	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	nange was authoriz DS, Florida Statutes Cable DRS DELETE DELETE	13. 1.1Tl 1.2 NA 1.3 STI 2.2 NA 2.3 STI 2.4 CM 3.4 CM 3.4 CM 4.1 Ti 4.1	Aport signature resis. TLE ME REFT ADDRESS Y-ST-ZIP TLE ME REFT ADDRESS	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change	PRS IN 12 Addition
or register familiar wit signature	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	lange was authoriz DS, Florida Statutes CARS DELETE DELETE DELETE	13. 1.1Tl 1.2 NA 1.3 ST 2.4 CH 3.4 CH 3.4 CH 3.4 CH 4.4 C	Aport signature resistance Aport signature resistance ME REF1 ADDRESS Y-S1-ZIP ILE ME REE1 ADDRESS Y-S1-ZIP ILE ME REE1 ADDRESS Y-S1-ZIP ILE ME ME ME ME ME ME ME ME ME	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change	PRS IN 12 Addition Addition
Or register familiar wit IGNATURE 2. ILE MME REELADDRESS 3Y-SI-ZIP ILE MME REETADDRESS 1Y-SI-ZIP ILE MME REETADDRESS 1Y-SI-ZIP ILE MME REETADDRESS	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	lange was authoriz DS, Florida Statutes CARS DELETE DELETE DELETE	13. 1.1 Ti 1.2 NA 1.3 STi 2.4 Ci 3.1 Ti 3.2 NA 3.3 STi 4.4 Ci 4.2 NA 4.3 STi 4.3 S	Aport signature resistance Aport signature resistance ME REFT ADDRESS Y-ST-ZIP ILE ME REET ADDRESS Y-ST-ZIP ILE ME REET ADDRESS Y-ST-ZIP ILE ME REET ADDRESS HEET ADDRESS	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change	PRS IN 12 Addition Addition
OF REGISTER OF TABLE OF	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	lange was authoriz DS, Florida Statutes CARS DELETE DELETE DELETE	13. 1.1 Ti 1.2 NA 1.3 STi 2.4 Ci 3.1 Ti 3.2 NA 3.3 STi 4.4 Ci 4.2 NA 4.3 STi 4.3 S	Aport signature resistance Aport signature resistance ME REF1 ADDRESS Y-S1-ZIP ILE ME REE1 ADDRESS Y-S1-ZIP ILE ME ME HEE1 ADDRESS Y-S1-ZIP ILE ME HEE1 ADDRESS Y-S1-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change	PRS IN 12 Addition Addition
OF TEGISTER OF TE	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	DELETE DELETE DELETE	13. 1.1 Ti 1.2 NA 1.3 STi 2.4 Cri 3.1 Ti 4.2 NA 4.3 STi 4.4 Cri 4.	Aport signature resistance Aport signature resistance ME REFT ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME HEET ADDRESS Y-ST-ZIP TLE ME HEET ADDRESS Y-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
OF REGISTER OF REGISTER OF STATE OF STA	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	DELETE DELETE DELETE	13. 1.1 Ti 1.2 NA 1.3 STi 2.4 GH 3.5 Ti 3.2 NA 3.3 STi 4.4 CH 4.2 NA 4.3 STi 4.5 CH 5.1 Ti 5.2 NA 5.2 NA 5.3 STi 5.3	Aport signature resistance Aport signature resistance ME REFT ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME HEET ADDRESS Y-ST-ZIP TLE ME HEET ADDRESS Y-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
OF REGISTER OF REGISTER OF STATE OF STA	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	DELETE D	13. 1.1 Ti 1.2 NA 1.3 STi 1.4 Cii 1.2 NA 1.3 STi 1.4 Cii 1.5 NA 1.5 STi 1.5 NA 1.5 STi 1.5 NA 1.5 STi 1.5	Aport signature reva. TLE ME REFT ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change Change Change	PRS IN 12 Addition Addition Addition Addition
or register familiar with signature. 2. ILE AME IREE LADDRESS ITY-SI-ZIP ILE AME IREET ADDRESS ITY-SI-ZIP ILE AME	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	DELETE DELETE DELETE	13. 1.1 Ti 1.2 NA 1.3 STi 1.4 Ci 1.3 STi 1.4 Ci 1.5 STi 1.	Aport signature reva. ILE ME REFT ADDRESS Y-ST-ZIP ILE ME REET ADDRESS Y-ST-ZIP ILE ME HEET ADDRESS Y-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
OF TEGISTER FEMALE SIGNATURE 12. ITLE SIGNATURE ITLE SIME I ADDRESS SITY - ST - ZIP ITLE SIME I ADDRESS SITY - ST - ZIP ITLE SIME I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME I THEFT I ADDRESS SITY - ST - ZIP ITLE SIME SIME SIME SIME SIME SIME SIME SIM	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	DELETE D	13. 1.1 TI 1.2 NA 1.3 STI 2.4 CH 3.1 TI 3.2 NA 3.3 STI 4.2 CH 5.1 TI 5.2 NA 5.3 STI 6.1 TII 6.2 NA	Aport signature resize Aport signature resize ME REFT ADDRESS Y-ST-ZIP ILE ME REET ADDRESS Y-ST-ZIP ILE ME HEET ADDRESS Y-ST-ZIP ILE ME ME HEET ADDRESS Y-ST-ZIP ILE ME ME ME ME ME ME ME ME ME	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change Change Change	PRS IN 12 Addition Addition Addition Addition Addition
or register familiar wit SIGNATURE	ed agent, or both, in the State of Fig. th, and accept the obligations of, Se Styraure, types or printed name of registered age OFFICERS A VSTD SALSER, FLOYD S., JR. 2812 SE 31ST STREET OCALA FL PD SALSER, CONNIE K. 2812 SE 31ST ST	orida. Such chection 607.050	DELETE D	13. 1.1 TI 1.2 NA 1.3 STI 2.4 CH 3.1 TI 3.2 NA 3.3 STI 4.2 CH 5.1 TI 5.2 NA 6.3 STI 6.1 TII 6.2 NA 6.3 STI 6.3	Aport signature reva. ILE ME REFT ADDRESS Y-ST-ZIP ILE ME REET ADDRESS Y-ST-ZIP ILE ME HEET ADDRESS Y-ST-ZIP	eard of directors. I hereby acc	ept the app	DATE	D DIRECTO Change Change Change Change	PRS IN 12 Addition Addition Addition Addition Addition

SIGNATURE:

Connie Salser/PD 4/42/96 352-694-7195