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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

M84920

1. Corporation	MENT # M8492 A. Brunsting, P.A.	20 (1)	)		
Principal Place o	of Rusinoss	Mai'ing Address	THE PERSON OF STANCES OF STANCES		
3561 S.W. 24TH LANE DELRAY BCH. FL 33445 US		3561 S.W. 24TH LANE DELRAY BCH. FL 33445 US			
00		03		3. Date incorporated or Qualified 3a. Date of Lest Report	
2. Principal Plac	ce of Business	2a. Mailing Address		06/07/1988         05/01/1995           4. FEI Number         Applied	1 For
		26		65-0060085 Not Applicable	
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additi	
City & State		City 8 State		- Fee Hequire	
3		28		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Added to Fe	
<i>Z</i> β+	Country	Zip	Country	8. This corporation has liability for intangible tax under s 199.03	32,
4	25 9. Name and Address of Curre	29 Pagistered Agent	30]	Florida Statutes	
	5. Hame and Address of Curre	ent negistered Agent	81 Name	10. Name and Address of New Registered Agent	<del></del>
BRUNSTI	NG, CAROL A.		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
3561 S.W. 24TH LANE				aross ( .c. box Humbor is Not Accopitatio)	
DELRAY	BCH. FL 33445		83		
			84 City	FL 85 Zip Code	<del></del>
or registere familiar with SiGNATURE	d agent, or both, in the State of Fio i, and accept the obligations of, Sec Same in types or prosed came of registering	rida. Such change was auth ction 607.0505, Florida Statu	orized by the correction's be	oration submits this statement for the purpose of changing its registere and of directors. I hereby accept the appointment as registered agent.    DATE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	. I am
mut	D OFFICERS A	DELETE	1 1 TITLE		12 Addition
NAME	BRUNSTING, CAROL A.		1.2 NAME		ido-pari
STREET ADDRESS	3561 S.W. 24TH LANE		1.3 STREET ADDRESS		
CITY ST-ZIC	DELRAY BEACH FL	· ··· · · · · · · · · · · · · · · ·	1.4 CITY - ST - ZIP		
PIRLE		☐ DELETE	2 1 TITLE	☐ Change ☐ A	Addition
NAM: STREET ADDRESS			2 2 NAME 2 3 STREET ADDRESS		
CHY ST ZIE			2 4 CITY - ST - ZIP		
inte		DELFTE	3 1 TITLÉ	Change A	Addition
NAM:			3.2 NAME		
SERE-LADDRESS			3.3 STREET ADDRESS		
CIY 51-Zer			3 4 CITY - ST - ZIP	[7] Change [7]	0.00101
TO LE NAME		DEFELE	4. 1 TITLE 4.2 NAME	Change C A	Addition
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		
OII + S* - 7 *			4.4 City-St-Zip		
THE I		DELETE	5 1 TITLE	Change A	Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - \$7 - 7IP		ET DELETE	5 4 CHY-ST-ZIP	Pilot. Pilot	A 24:0:
IP UF NAME		☐ DELETE	6 1 TITLE 6 2 NAME	☐ Change ☐ A	Addition
STREET ADDRESS			6.3 STREET ADDRESS		
CITY ST ZIP			6.4 CITY-ST-7IP		
14. Ldo hereby certify that	r certify that the information supplied the information indicated on this an am an officer or director of the con-	nual report or supplemental:	furnished and does not qualify	r for the exemption stated in Section 119.07(3)(k), Florida Statutes. I ful rate and that my signature shall have the same legal effect as if made	irther

SIGNATURE: