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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M86073

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Principal Plac % DANIEL E. ( 1172 PELICAN PALM CITY FL US	CRESCENT	Mailing Address % DANIEL E. CAPEN 1172 PELICAN CRESCEN PALM CITY FL 34990-242 US	•					
00		03			<ol> <li>Date Incorporated or Qualified 06/14/1988</li> </ol>		ate of Last Ro <b>)8/1996</b>	epori
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number			plied For
21		26			65-0062771		<u> </u>	t Applicable
Suite, Apt.	#, etc.	Suito, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
22 City & Stat	lo .	City & State					Fee Re	
23 City & Stat	le .	28			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zφ	Country		8. This corporation has liability for			
24	25	29	30		Florida Statutes	☐ Yes [	ON [	
	9. Name and Address of Curren	nt Registered Agent		r	10. Name and Address of New I	Registered a	Agent	
	EN, DANIEL E.		81	Name				i
	2 PELICAN CRESCENT		82	Street Addi	ress (P.O. Box Number is Not Accept	lable)		
PAL	M CITY FL 34990		83					
			84	City		FL	<b>85</b> Zip (	Døde
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida State	utes, the abov	Le-named corp	poration submits this statement for the		changing it	s registered
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig.	of Florida. Such change was ations of, Section 607,0505. F	s authorized by Florida Statute	y the corporat s	tion's board of directors. I hereby acc	cept the app	ointment as	registered
SIGNATURE				-				
	Signature, lyped or printed name of registered ag-			ent signature requir	red when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.					
	l BN				ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	PD CAPEN DANIELE	DECETE	1.1 THUE		ADDITIONS/CHANGES TO OF	FICERS AND	Change	Addition
NAME	CAPEN, DANIEL E.		1.2 NAME	ADVOCCE	ADDITIONS/CHANGES TO OF	FICERS AND		
NAME STREET ADDRESS	CAPEN, DANIEL E. 1182 PELICAN CRESCENT		1.2 NAME 1.3 STREET	ì	ADDITIONS/CHANGES TO OF	FICERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	CAPEN, DANIEL E.		1.2 NAME	ì	ADDITIONS/CHANGES TO OT	FICERS AND		
NAME STREET ADDRESS	CAPEN, DANIEL E. 1182 PELICAN CRESCENT PALM CITY FL		1.2 NAME 1.3 STREET 1.4 CHY-5	ì	ADDITIONS/CHANGES TO OT	FICERS AND	Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	CAPEN, DANIEL E. 1182 PELICAN CRESCENT PALM CITY FL VD CAPEN, DOUGLAS R. 1172 PELICAN CRESCENT		1.2 NAME 1.3 STREET 1.4 CHY - 5 2.1 TITLE	51-7IP	ADDITIONS/CHANGES TO OT	FICERS AND	Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CAPEN, DANIEL E. 1182 PELICAN CRESCENT PALM CITY FL VD CAPEN, DOUGLAS R. 1172 PELICAN CRESCENT PALM CITY FL	☐ DELETE	1.2 NAME 1.3 STREET 1.4 CITY - 5 2.1 TITLE 2.2 NAME	S1-ZIP ADDRESS	ADDITIONS/CHANGES TO OT	ICEHS ANL	Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CAPEN, DANIEL E. 1182 PELICAN CRESCENT PALM CITY FL VD CAPEN, DOUGLAS R. 1172 PELICAN CRESCENT PALM CITY FL STD		1.2 NAME 1.3 STREET 1.4 CHY-5 2.1 THE 2 PRAME 2 3 STREET 2.4 CHY- 3 1 THE	S1-ZIP ADDRESS	ADDITIONS/CHANGES TO OT	I CEHS ANL	Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CAPEN, DANIEL E. 1182 PELICAN CRESCENT PALM CITY FL VD CAPEN, DOUGLAS R. 1172 PELICAN CRESCENT PALM CITY FL STD CAPEN, JEFFREY A.	☐ DELETE	1.2 NAME 1.3 STREE 1.4 CHY-5 2.1 THE 2.2 NAME 2.3 STREE 2.4 CHY- 3.1 FOLE 3.2 NAME	S1-ZIP ADDRESS S1-ZIP	ADDITIONS/CHANGES TO OT	ICEHS ANL	Change Change	Addition
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4. 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 logal 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 12 of changed, or on advallachment with an address.

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561-282-3734