FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	N03214

(6)

Principal Place of Business Mailing Address												
10653 GREEN TRAIL DRIVE SOUTH C/O WILLIAM F. CROUSE BOYNTON BEACH FL 33436				10553 GREEN TRAIL DRIVE SOUTH C/O WILLIAM F. CROUSE BOYNTON BEACH FL 33436								
								3. Date Incorporated or Qualified 05/22/1984		of Last Report 19/1995		
2. Principal Pl	ace of Busine NOAI		2a. 26	Mailing Address	nAk .	CT'/	REET	4. FEI Number NOT APPLICABLE		Applied For Not Applicable		
Suite, Apt.			27	Suite, Apt. #, etc.			1	5. Certificate of Status Desired	\$	8.75 Additional Fee Required		
City & State 23 LANTANA, FL				City & State 28 LANTANA, FL			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Apided to Fees			
Zip 24 334	1	Country 25 PALM BEAC		^{Zρ} 33462	Cou	intry	BEACH	8. This corporation has liability for in	ntangible tax af	nder s. 199.032,		
		and Address of Curre		tered Agent		L.		10. Name and Address of New Ro	egistered Age	nt		
						81	Name	aus A. Tatt	•			
	E, WILLIAM					82	Street Addres	ss (P.O. Box Number is Not Acceptable	e)			
		L DRIVE SOUTH				83		0684 GREENTR	PAIL I	DR. S		
BUTNIU	ON BEACH I	FL 33436				63						
						84	City 🙈	OVALTAN REACH	E 8	5 Zip Code		
11. Pursuant	to the provisio	ons of Sections 617.0502	2 and 617	7.1508, Florida Statu	utes, the abo	ve-na	amed corporal	OYNTON BEACH	FL ose of changin	33436		
or register familiar wi	red agent, or I th. and accer	both, in the State of Flori at the obligations of Sect	da. Such	n change was author 0503 - Elorida Statute	ized by the d	orpo	ration's board	tion submits this statement for the purp of directors. I hereby accept the appo	intment as regi	stered agent. I am		
					100		anth)	2/27/	91		
	Signature, typed o	S A ZOT' or printed name of registered agen			NO1E: Registered	Ageny	Signature required v	when reinstaling)	DATE			
12.	SD	OFFICERS AN	D DIREC		13.		<u> </u>	ADDITIONS/CHANGES TO OFFI				
TITLE	DEVINE,	IAMES		DELETE	1.1 Tt			DS FUNE LAMES	⊠ C	hange 🗌 Addition		
NAME		WBERRY WAY			1.2 N			EVINE, JAMES 70 DEWBERRY WA	· ·			
STREET ADDRESS		ALM BCH FL					DORESS 56	TO DENBERRY WA	-,			
CITY-ST-ZIP TITLE	VD VD	TEN DOLL I		DELETE	1.4 CI 2.1 TI	1Y-S1-	-ZIP	EST PALM BEACH,		hange Addition		
NAME	LOVELL,	TOM								nange L Addition		
STREET ADDRESS	6125 PIN				2.2 N		Doneso					
CITY-ST-ZIP	LANTAN/						DDRESS					
TITLE	TD			DELETE	3111	ITY-ST		-	XC	hange		
NAME	ZOTTO, I	LOUIS			32 N		TI	uis A. Zotto	—	nungo		
STREET ADDRESS		YPRESS BEND DR							55 (
CITY-ST-ZIP	BOCA RA				24.0	ITY OL	2:0	684 GREENTRAIL DYNTON BEACH,	FL 3	24.26		
TITLE				DELETE	4111		A36	JATON BEACH		3436 hange		
NAME					4 2 N					- Addition		
STREET ADDRESS							DDRESS					
CITY-ST-ZIP						TY-ST-						
TITLE				DELETE	5 1 Ti		- cir	90000125		zange Addition		
NAME					5 2 N/			9000017 3 -03/08/96010	19. SHE	20 D Vocation		
STREET ADDRESS							.DDRESS	***61.25	.010			
CITY-ST-ZIP							1					
TITLE				DELETE	6.1 TJ	TY-ST- TLE	- TIL			nange		
							,					

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. It 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 medicath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my appears in Block 12 or Block 13 if changed or on an attachment with an aderess.

6.3 STREET ADDRESS

SIGNATURE:

NAME STREET ADDRESS

> SIGNATURE AND TYPED OR PRINTED NAME OF SI NING OFFICER OR DIBLETOR