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 N06162

(4)

Principal Place of Business Mailing Address	YOURD BEINN 16000 DITIO FEN DERIN DIDIE DYBEL DIDIE KIDIN DIDIE KON DIDIE
POST OFFICE BOX 196722 POST OFFICE BOX 196722 WINTER SPRINGS FL 32719 WINTER SPRINGS FL 32719	
3. Date Incorporat 11/14/19	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2752	Applied For
21 26 59-27529 Suite, Apt. #, etc. Suite. Apt. #, etc.	140t Applicable
22 27 5. Certificate of Sta	Fee Required
6. Election Campa	T TOTO May be
Zin Country 7:-	Added to Fees
24 25 29 30 Florida Statutes	n has liability for intangible tax under s. 199.032, Yes No
	dress of New Registered Agent
81 Name	
SWEENEY, SCOTT SWEENEY, SCOTT 82 Street Address (P.O. Box Number)	is Not Acceptable)
6025A CASA PARK CRCL GOZIA CASA PIARK	CRCL.
WINTER SPRINGS FL 32708	
84 City	
84 City	■ 85 Zip Code _
ININTER SPRING	FI 2200AQ
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above 200 MINTER SPRINGS.	FL 32768
	FL 32768
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Upgraby	FL 32768
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or profed name of registered agent and tit of a speciable (NOTE: Registered Agent signature required when reinstaing)	ment for the purpose of changing its registered office accept the appointment as registered agent. I am
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typod or proted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHA	ment for the purpose of changing its registered office accept the appointment as registered agent. I am
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and bit of applicable OFFICERS AND DIRECTORS 13. ACDITIONS/GFW THE P DELETE 1.1 TITLE	ment for the purpose of changing its registered office accept the appointment as registered agent. I am
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this state of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typod or proted name of registered agent and bit of applicable (NOTE Registered Agent signature required when reinstaing) 12. OFFICERS AND DIRECTORS 13. ACDITIONS/CH/B TITLE P DELETE 1.1 TITLE 1.2 NAME	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE Signature, typod or printed name of registered agent and bit of applicable OFFICERS AND DIRECTORS 13. ACDITIONS/GFB TITLE P DELETE 1.1 TITLE NAME BLISS, ROBERT 1.2 NAME STREET ADDRESS 1492 CASA PARK CIRCLE 1.3 STREET ADDRESS 544	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typoid or proted name of registered agent and tito if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CHA TILLE P INDIE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS TILLE P IDELETE 1.1 TIFLE NAME STREET ADDRESS 1492 CASA PARK CIRCLE WINTER SPRINGS FL 32708 14 CITY-ST-ZIP	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and bit of applicable (NOTE Registered Agent signature required when reinstaing) 12. OFFICERS AND DIRECTORS TIME P DELETE 1.1 TIFLE NAME BLISS, ROBERT 1.2 NAME STREET ADDRESS LITY-SI-ZIP WINTER SPRINGS FL 32708 14 CITY-SI-ZIP DELETE 2 1 TITLE VD DELETE 2 1 TITLE VD	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE Signature, typoid or proted name of registered agent and title if applicable OFFICERS AND DIRECTORS 13. AODITIONS/CHA TITLE P MAME BLISS, ROBERT STREET ADDRESS 1492 CASA PARK CIRCLE LITTLE VD DELETE 1.1 TITLE VD DELETE 1.2 NAME 1.3 STREET ADDRESS LITY-ST-ZIP WINTER SPRINGS FL 32708 1.4 CITY-ST-ZIP DELETE 2.1 TITLE VD OSBOURNE, DOUGLAS	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typod or proted name of registered agent and title if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CFW INTEL P IDELETE 1.1 TITLE NAME BLISS, ROBERT 1.2 NAME STREET ADDRESS 1492 CASA PARK CIRCLE 1.3 STREET ADDRESS DELETE 1.4 CITY-ST-ZIP WINTER SPRINGS FL 32708 1.4 CITY-ST-ZIP TITLE VD OSBOURNE, DOUGLAS STREET ADDRESS 622 PEARL RD ANAME ADDITIONS/CFW DELETE 2 1 TITLE 2 NAME 2 STREET ADDRESS SAME SAME STREET ADDRESS SAME STREET ADD	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typod or prated name of registered agent and title if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CRV TILLE P IDELETE 1.1 TILLE NAME BLISS, ROBERT 1.2 NAME SIREET ADDRESS 1492 CASA PARK CIRCLE LITTLE VD IDELETE 1.3 SIREET ADDRESS SAF 1.4 CITY-ST-2IP WINTER SPRINGS FL 32708 1.4 CITY-ST-2IP TILLE OSBOURNE, DOUGLAS STREET ADDRESS 622 PEARL RD 23 STREET ADDRESS CITY-ST-2IP WINTER SPRINGS FL 24 CITY-ST-ZP WINTER SPRINGS FL	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this state of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaing) 12. OFFICERS AND DIRECTORS TITLE P DELETE 1.1 TITLE NAME BLISS, ROBERT 1.2 NAME STREET ADDRESS LITY-S1-ZIP WINTER SPRINGS FL 32708 1.4 CITY-S1-ZIP WINTER SPRINGS FL 2 NAME STREET ADDRESS G22 PEARL RD 2 3 STREET ADDRESS CITY-S1-ZIP WINTER SPRINGS FL 1.1 TITLE VD DELETE 2 1 TITLE 2 NAME 2 NAME 2 STREET ADDRESS SOUTHY-S1-ZIP WINTER SPRINGS FL 1.1 TITLE 1.2 TITLE 1.3 STREET ADDRESS SOUTHY-S1-ZIP WINTER SPRINGS FL 2 4 CITY-S1-ZIP TITLE T DELETE 3 1 TITLE 3 1 TITLE	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and bit of applicable OFFICERS AND DIRECTORS 13. ADDITIONS/GFW INCIE Registered Agent signature required when reinstaining 12. OFFICERS AND DIRECTORS 13. ADDITIONS/GFW INCIE Registered Agent signature required when reinstaining 14. THILE P INDIE P INDIE P INDIE REGISTERED Agent signature required when reinstaining 12. NAME SIREET ADDRESS 14. STREET ADDRESS SAF III. STREET ADDRESS SAF III. STREET ADDRESS SOFT STREET ADDRESS 622 PEARL RD OSBOURNE, DOUGLAS STREET ADDRESS 622 PEARL RD 23 STREET ADDRESS CITY-SI-ZIP WINTER SPRINGS FL 24 CITY-SI-ZIP TITLE T DELETE 31 TITLE SWEENEY, SCOTT SOFT	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this state of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and bit of applicable OFFICERS AND DIRECTORS 13. ACDITIONS/CF-07 TILLE P MAME BLISS, ROBERT 1.2 NAME SIREET ADDRESS 1492 CASA PARK CIRCLE 1.3 STREET ADDRESS SAC CITY-S1-2IP WINTER SPRINGS FL 32708 1.4 CITY-S1-2IP TILLE VD OBBOURNE, DOUGLAS STREET ADDRESS 622 PEARL RD OSBOURNE, DOUGLAS STREET ADDRESS 622 PEARL RD TILLE T OBLETE 3 1 TILLE 3 2 NAME SWEENEY, SCOTT STREET ADDRESS 602A CASA PARK CRCL 3 3 STREET ADDRESS SOUTH STREET ADDRESS	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or protect name of registered agent and the of applicable (NOTE Registered Agent signature required when reinstating)	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature typoed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaing)	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or prated name of registered agent and to if austicable (NOTE Registered Agent signature required when reinstating) 12.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature Typod or printed name of registered agent and bt or applicable INOTE: Registered Agent segrature required when reinstaining.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature byted or protect name of registered agent and to if aspicable. INOTE Registered Agent signature required when reinstating! 12. OFFICERS AND DIRECTORS 13. ADDITIONS/GHO TIPLE P SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/GHO TIPLE P SIGNATURE P DELETE 1.1 TIPLE NAME BLISS, ROBERT 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS SAM WINTER SPRINGS FL 32708 1.4 CITY-ST-ZIP WINTER SPRINGS FL 2.2 NAME SIREET ADDRESS GOZ PEARL RD CITY-SI-ZIP WINTER SPRINGS FL DELETE 3.1 TIPLE T DELETE 3.1 TIPLE T DELETE 3.2 NAME SWEENEY, SCOTT SUBMET ADDRESS GOZA CASA PARK CRCL 3.3 STREET ADDRESS CITY-SI-ZIP WINTER SPRINGS FL 32708 IPLE SWEENEY, SCOTT SUBMET ADDRESS CITY-SI-ZIP WINTER SPRINGS FL 32708 IPLE SUBMET ADDRESS CITY-SI-ZIP WINTER SPRINGS FL 32708 IPLE SUBMET ADDRESS SOM ADDITIONS/GHO A	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature typed or proton name of registered agent and site of authorized by the corporation's board of directors. I hereby the directors of the corporation of directors. I hereby the directors of the corporation of directors. I hereby the directors of the corporation of directors. I hereby the directors of the corporation of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the directors of the corporation's board of directors. I hereby the corporation of directors. I hereby the corporation's board of directors. I hereby the corporation's board of directors.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE ANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature typed or protect name of registered agent and bt of augmentate (NOTE Registered Agent separative required when reinstand) 12.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature Expend or profised name of registered agent and storf authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature Expend or profised name of registered agent and storf authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this state or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signiture spread or printed or printed name of registered agent and storid authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signiture spread or printed or printed name of registered agent and storid authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signiture spread or printed or printed name of registered agent spread or printed when reinstating] 12.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Sipilative byted or profess name of registered agent and storid authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Sipilative byted or profess name of registered agent and storid authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Sipilative byted or profess name of registered agent agent agration required when reinstang. 12.	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this stated or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this stated familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent agent and stord authorized by the corporation's board of directors. I hereby familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent agent supported agent support	ment for the purpose of changing its registered office accept the appointment as registered agent. I am DATE

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. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

Date

CR2E037 (12/95)