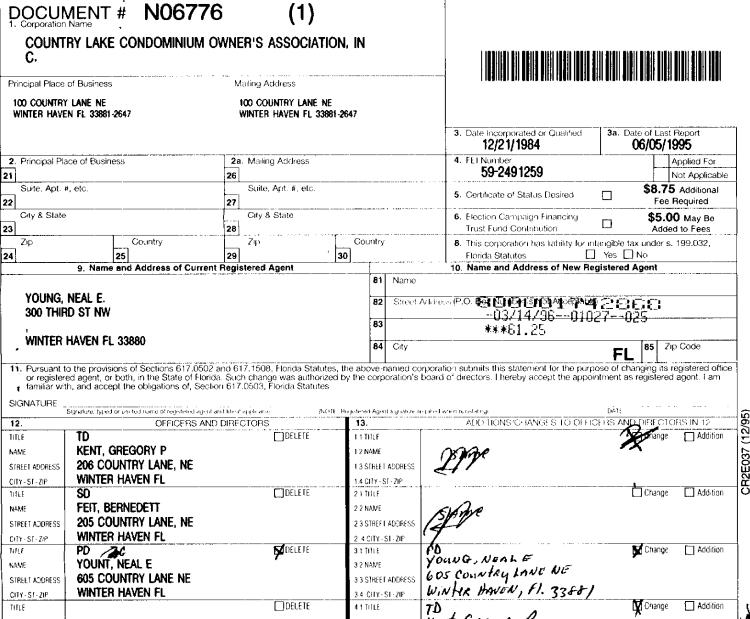
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NONPROFIT CORPORATION ANNUAL REPORT



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

1996



HENT, GREGORY P 206 COUNTRY IN, NE WIN) ER HAVEN, F. 3388/ 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY - ST - ZIP CITY - ST - ZIP TIT. F DELETE 5.1 TITLE Change Addition Foit Beryedett NAME 5.2 NAME 205 COUNTRY IN, WE WIN TER HAVEN, Fl 3388/ STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY - ST- ZiP DELETE ■ Addition ☐ Change THLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-SE-7/P 6.4 CHY-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. 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 charge

SIGNATURE:

OF PRITE NAME OF SIGNING OFFICER OR DIRECTOR

S