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NONPROFIT CORPORATION ANNUAL REPORT

1996



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

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1 Cornoration Name				-		_	_

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	ES WINTERPARK NORTH, IN	Mailing Address								
		C/O R & P MANAGEM 265 S. AIRPORT ROAD NAPLES EL 33942	RT ROAD							
		WI CEO 12 W372				3. Date Incorporated or Qualif 05/27/1986	ied 3a.	Date of Last 04/26/		
Principal P	Place of Business	2a. Mailing Address	•			4. FEI Number 59-3847689			Applied For Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	; D		5 Additional Regulred	
City & Stal	te	City & State	•			6. Election Campaign Financin	,a 🗆	\$5.0	00 May Be	
Zip	Country	Zip	Cour	ntry		Trust Fund Contribution 8. This corporation has liability	for intangible	tax under s	d to Fees . 199.032,	
	25	29	30			Florida Statutes	☐ Yes			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of No	w Registere	d Agent		
D&D	MANAGEMENT ASSOCIATES		Ĺ		varne	50.0				
265 AIF	RPORT ROAD SOUTH				Street Addi	Address (P.O. Box Number is Not Acceptable)				
NAPLES	S FL 33942		1	83	20			1		
			i		City		F	L	p Code	
familiar w	to the provisions of Sections 617.0502 ared agent, or both, in the State of Floric with, and accept the obligations of, Secti	ion 617.0503. Florida Statutes	.co by and Q			ra or anoctors. I notoby accept the	appointment	as registered	agont, ram	
NATURE	Signature, typed or printed name of registered agent	and title if applicable.				d when reinstating)	DATE			
NATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. INC					DATE			
	OFFICERS AND PD	and title if applicable.	TE: Registered	Agent sig		d when reinstating)	DATE		<u> </u>	
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4/17/92 941-793-4579
Destrue Prove * SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR