FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

LAKEWORTH FL 33467 Substance Country Co	
2. Mailing Address 21	
Suite, Apt. #, etc. Suite,	_
Suite, Apt. #, etc 22	le
28 Trust Fund Contribution	
25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name GLANTZ, EDWARD R. 4674 FOUNTAINS DRIVE SOUTH LAKEWORTH FL 33467 83 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Supplementary Supplementary I and the illumination of registered Agent signature required when monstating DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE HIS AND DIRECTORIS IN 12 13. TARGET ADDRESS GLANTZ, EDWARD R. 12 NAME 13 STREET ADDRESS 4674 FOUNTAINS DR. SOUTH LAKEWORTH FL 14 CHY-ST-ZIP	
9. Name and Address of Current Registered Agent GLANTZ, EDWARD R. 4674 FOUNTAINS DRIVE SOUTH LAKEWORTH FL 33467 82 Street Address (P.O. Box Number is Not Acceptable) 83 FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Synthem Speed or proted name of registered agent and this lampsable in NOTE Trogetered Agent signature respiratively process of the Agent signature respiratively in the State of Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12 TILE PD DELETE 11 TITLE Change Addition A674 FOUNTAINS DR. SOUTH 13 STREET ADDRESS CITY ST ZIP LAKEWORTH FL 14 CITY-ST-ZIP	\neg
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SIGNATURE Signature: Speed or profited name of registered agent and attend agent	ce
Signature by and or control name of registered agent a	
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NAME GLANTZ, THELMA 22 NAME	
STREET ADDRESS 4674 FOUNTAINS DR. SOUTH 23 STREET ADDRESS	
CITY - ST - ZIP	
NAME GLANTZ, RICHARD 32 NAME	\Box
STREET ADDRESS 21 TAMIL VISTA 33 STREET ADDRESS	
CITY ST ZIP CORTE MADERA CA 34 CITY-ST-ZIP	
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NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
C1Y+S1-7/P 54 C11Y+S1-7/P	
TITLE DELETE 61 TITLE Change Addition NAME 62 NAME	
V2 IVAN	
STREET ADDRESS CITY ST-ZIP 63 STREET ADDRESS 64 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, 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 chapter, or on an attachings with an address.	-
SIGNATURE: CHURCH (SIGNING OFFICER OR DIRECTOR DUS 2-6-96 407-968-472) BIGNATURE AND TYPED OR PRINTED NAME DE SIGNING OFFICER OR DIRECTOR DUS 2-6-96 407-968-472) Daylor of Prince A	