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NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N284

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OLDSMAR, FLORIDA ROTARY CLUB, INC.  Principal Place of Business  Mailing Address  SCANABES S, DAYHOFF II	Principal Place of Business Mailing Address SUMARES S. DAYHOFF III P. O. BOX 1372 OLDSMAR R. 34877 OLDSMAR R. 34877 OLDSMAR R. 1, 34877 OLDSMAR R.	1. Corporation Name				
## WARRES & DAYHOFF III P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F1, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR F2, 84677  ## Applied Fig. P. O. BOX 1972 CLOSMAR	Principal Place of Business Mailing Address SUMARES S. DAYHOFF III P. O. BOX 1972 OLDSMAR R. 1, 3477 OLDSMAR R. 1, 34877 OLDSM	OLDSMAR, FLORIDA BOTARY CLUB, INC.				
Name of Bulaness NAMES S. DATHOFF III P. O. BOX 1972 OLDSMAR R. J. Agents S. Date Incorporated or Cualified 09/19/1988 4. FE Number 59/293855 5. Certificate of Status Dealered 58.75 Additional Fee Required 58.00 May Be Assate City & State City & Sta	MOHARES S. DAYHOFF III P. O. BOX 1372 CLISMAR R. J. 36477 CLISMAR	OLDOWANI, I CONIDA NOTANI OLOD, ING.			E (MANIANT BIN TIME INTEL ACURE FROM HAVE NO A BIDIE MINER MANIA DENIE MINER	
Name of Bulaness NAMES S. DATHOFF III P. O. BOX 1972 OLDSMAR R. J. Agents S. Date Incorporated or Cualified 09/19/1988 4. FE Number 59/293855 5. Certificate of Status Dealered 58.75 Additional Fee Required 58.00 May Be Assate City & State City & Sta	MOHARES S. DAYHOFF III P. O. BOX 1372 CLISMAR R. J. 36477 CLISMAR	1				
P. O. BOX 1372   P. O. BOX 1372   O. DEMAR R. JASET?   O. DEMAR R. JAS	P. O. BOX 1372   P. O. BOX 1372   CLIDSMAR FL 34677   CLIDSMAR FL 34678   CLIDSMAR F	Principal Plac	e of Business	Mailing Address		
P. O. BOX 1372   P. O. BOX 1372   O. DEMAR R. JASET?   O. DEMAR R. JAS	P. O. BOX 1372   P. O. BOX 1372   CLIDSMAR FL 34677   CLIDSMAR FL 34678   CLIDSMAR F	%CHARLES S.	DAYHOFF III	%CHARLES S DAYHOFF III		
# FEI Number   Applied For   A	## A. FEI Number   Applied For SP-983555   Not Applied For	P. O. BOX 137	72			, , , , , , , , , , , , , , , , , , , ,
2. Principal Reac of Business	2. Principal Place of Business   2a. Mailing Address   50-2953855   Not Applicable   St. Certificate of Status Desired   \$8.75 Additional   \$6. Election Campaign Financing   \$6.00 May 56 Additional	OLDSMAR FL	34677	OLDSMAR FL 34677		
2	2. Principal Place of Business   2a. Mailling Address   28   5. Certificate of Status Deaired   \$8.75 Additional   \$8.75 Additional   \$8.00	1				r ipplied i ci
Sultin, Apt. 4, etc.    Sultin, Apt. 4, etc.	Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  Zip  Zip  Country  Zip  Zip  Country  Zip  Country  Zip  Zip  Country  Zip  Country  Zip  Country  Zip  Zip  Zip  Country  Zip  Zip  Zip  Country  Zip  Zip  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	2. Principal P	Place of Business	2a Mailing Address		
Solite, Apt. #, etc.    Solite, Apt. #, etc.	Suite, Apt. #, etc.    Suite, Apt. #, etc.	<u> </u>	too of Eddingedo	<del>-</del>		J. Certificate of Status Desired
City & State	22		#, etc.			
22    25	Zip	22		27		
Zip   Country   Zip   Country   Zip   Country   S. This corporation ower or has pasted the current Registered Agent   S. Name and Address of Current Registered Agent   S. Name and Address of Current Registered Agent   S. Name and Address of Nov Regis	Ze	City & Stat	le			
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  12. Street Address (P.O. Box Number is Not Acceptable)  13. Street Address (P.O. Box Number is Not Acceptable)  14. Crivy FL 85 Zip Code  15. Pursuant to the provisions of Sections 617.0502 and 617.1508, Piorida 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, Piorida 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, Piorida 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, Piorida 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, Piorida 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, Piorida 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, Piorida 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, Piorida Statutes, the	B. Name and Address of Current Registered Agent  DAYHOFF, CHARLES S. III  CORNERSTONE CENTRE  3830 TAMPA ROAD, SUITE 150  PALM HARBOR FI. 34684  84 City  FL  85 Zip Code  84 City  FL  85 Zip Code  11. Parsuant 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, 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, and accept the obligations of, Section 617.0503, Florida Statutes.  11. Parsuant 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, and accept the obligations of, Section 617.0503, Florida Statutes.  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. TITLE  D D DELETE  13. TITLE  D D DELETE  13. TITLE  D D DELETE  22. TITLE  D D DELETE  23. TITLE  D Change Addition  Change Addition  STREET ADDRESS  CITY-51-27P  TITLE  D D DELETE  33. TITLE  D Change Addition  STREET ADDRESS  CITY-51-27P  OLDSMARF FL  D Change Addition  STREET ADDRESS  CITY-51-27P  OLDSMARF FL  D D DELETE  33. TITLE  D Change Addition  STREET ADDRESS  CITY-51-27P  OLDSMARF FL  S STREET ADDRESS  CITY-51-27P  OLDSMARF F	23		28		
Personal Property Tax due June 30.  No. No. No. No. No. No. No. No. No. N	25	Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
DAYHOFF, CHARLES S. III CORNERSTONE CENTRE 3830 TAMPA ROAD, SUITE 160 PALM HARBOR FL 34684  11. Pursuant to the provisions of Sections \$17,0502 and \$17,1502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered signer. I are tismilar with, and accept the obligations of JoSO, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered signer. I are tismilar with, and accept the obligations of JoSO, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered diffice or registered specific in specific in the statement for the purpose of changing its registered diffice or registered specific in specific in the statement for the purpose of changing its registered diffice or registered diffice or registered specific in specific in the statement for the purpose of changing its registered specific in specific in the statement for the purpose of changing its registered diffice or registered diffice or registered addition.  The specific in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered diffice or registered diffice or registered diffice or registered addition.  The specific in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered diffice.  The specific in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its registered approximation in the statement for the purpose of changing its re	DAYHOFF, CHARLES S. III  CORNERSTONE CENTRE 383 TAMPA ROAD, SUITE 150 PALM HARBOR FI, 34684  111. 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 spent, 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 office or registered spent, 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 office or registered and are accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ITIEL  D	24			30	Personal Property Tax due June 30. 🔲 Yes 💢 No
DAYHOFF, CHARLES S. III CORNERSTONE CENTRE 3830 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684  84 City FL 85 Zip Code  45 City FL 85 Zip Code  46 City FL 85 Zip Code  47 City FL 85 Zip Code  48 City FL 85 Zip Code  48 City FL 85 Zip Code  48 City FL 85 Zip Code  49 City FL 85 Zip Code  40 City FL 85 Zip Code  41. 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 algorit in similar with, and accept the obligations of Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered algorit in similar with, and accept the obligations of Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered algorit in similar with a minimal with, and accept the obligations of Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered algorit in similar with a minimal with a	DAYHOFF, CHARLES S. III CORNERSTONE CENTRE 3830 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684  84		9. Name and Address of Curr	eπt Registered Agent		10. Name and Address of New Registered Agent
CORNERSTONE CENTRE 3830 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684  44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutos, the above-harmed corporation submits this statement for the purpose of changing its registered office or registered agant, 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, 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, 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, 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, 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, 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, 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, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the days agent and the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the days agent and the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the days agent and the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the days and the state of Florida State of Florida State of Florida Stat	CORNERSTONE CENTRE  3830 TAMPA ROAD, SUITE 150 PALM HARBOR FI, 34684  24 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617 0502 and 617 1509. Florida Stabilus, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of Section 617 0503, Florida Stabilus, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 617 0503, Florida Stabilus, Signature required when reintating)  12.				81 Name	
CONNERSTONE CENTRE 3830 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684  84 City 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 this State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in this State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as 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, and riminitial with, and accept the oldigations of, Section 617.0503. Provided Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME  12. WARE  12. EDWARDS, DOUG  12. NAME  12. STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME  14. GITN-51-2P  15. STREET ADDRESS  16. STREET ADDRESS  16. STREET ADDRESS  17. ST.2P  18. STREET ADDRESS  19. STREET ADDRESS  19. STREET ADDRESS  19. STREET ADDRESS  10. ST	CORNERSTONE CENTRE 3830 TAMPA ROAD, SUITE 150 PALM HARBOR FL 34684  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, 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, or a familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  DELETE 1.3 TITLE DELETE 1.3 TITLE DELETE 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-51-2P  TITLE DELETE DELETE 1.3 STREET ADDRESS 1.4 CITY-51-2P  TITLE DELETE DELETE DELETE 1.3 TITLE DELETE 1.3 TITLE DELETE 1.3 TITLE DELETE 1.3 TITLE DELETE 1.3 STREET ADDRESS CITY-51-2P  TITLE DELETE DELETE 3.1 TITLE DELETE 3.1 TITL	DAYHO	FF, CHARLES S. III		82 Street A	Address (P.O. Box Number is Not Acceptable)
PALM HARBOR FL 34694  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Stabutes, 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, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and accept the obligations of, Section 617,0503, Florida Statutors, and the corporation's board of directors. I hereby accept the appointment as registered obligations, and accept the obligations of, Section 617,0503, Florida Statutors, and the corporation's board of directors. I hereby accept the appointment as registered obligation's part of the corporation's board of directors. I hereby accept the appointment as registered obligation's part of the corporation's board of directors. I hereby accept the appointment as registered above named corporation's board of directors. I hereby accept the appointment as registered above named corporation's board of directors. I hereby accept the appointment as registered above named corporation's board of directors. I hereby accept the appointment as registered above named corporation's board of directors. I hereby accept the corporation's board of dir	PALM HARBOR FL 34684  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, 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, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  D DELETE  1.3 TITLE  D DELETE  1.4 CITY-ST-2P  OLDSMAR FL  1.4 CITY-ST-2P  OLDSMAR FL  1.5 TITLE  D DELETE  2.2 NAME  STREET ADDRESS  OLDSMAR FL  DELETE  3.1 TITLE  D Change Addition  MULVHILL, JOHN  3.2 STREET ADDRESS  CITY-ST-2P  OLDSMAR FL  DELETE  4.1 TITLE  D Change Addition  MULVHILL, JOHN  3.3 STREET ADDRESS  CITY-ST-2P  OLDSMAR FL  3.4 CITY-ST-2P  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  MULVHILL, JOHN  3.3 STREET ADDRESS  CITY-ST-2P  OLDSMAR FL  3.4 CITY-ST-2P  1.5 TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  Addition  Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D Change Addition  AD	CORNE	rstone centre			
TILE D DELETE 1.1 STREET ADDRESS OTLOSMAR FL DELETE 1.2 NAME STREET ADDRESS OTLOSMAR FL DELETE DELETE 1.2 NAME STREET ADDRESS OTLOSMAR FL DELETE 1.3 TITLE D CRANGE Addition STREET ADDRESS OTLOSMAR FL DELETE 1.3 TITLE D CRANGE 1.3 STREET ADDRESS OTLOSMAR FL DELETE 1.3 STREET ADDRESS 0.3 STREET ADDR	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Stautus, 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, and the flag policials of the corporation's board of directors. I hereby accept the appointment as registered agent, and the flag policials of the corporation's board of directors. I hereby accept the appointment as registered agent, and the flag policials of the corporation's board of directors. I hereby accept the appointment as registered agent and title if applicable.  SIGNATURE  S	3830 TA	MPA ROAD, SUITE 150		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 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, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  DELETE  1.1 ITILE  DELETE  1.1 ITILE  DISTANT  SIRRET ADDRESS  120 E STATE ST  OLDSMAR FL  OLDSMAR FL  DELETE  2.1 TITLE  DISTANT  SIRRET ADDRESS  OLDSMAR FL  SIGNATURE  DELETE  3.1 ITILE  DISTANT  Change Addition  Addition  Addition  Addition  SIRRET ADDRESS  SIGNATURE  SIRRET ADDRESS  OLDSMAR FL  DELETE  3.1 ITILE  DISTANT  Change Addition  A	THE D D DELETE 21 TITLE D DELETE 31 TITLE D DELE	PALM H	iarbor fl 34684		84 City	IDE 7 7 Codo
SIGNATURE   Signature, typed or printed name of registrined agent and tills if applicables   (NOTE: Registrined Agent signature required when reinstating)   DATE	Signature   Signature, typed or printed name of registrord aport and title if applicable   (NOTE. Registrord Aport signature required when reinstating)   DATE					
SIGNATURE   Signature, typed or printed name of registrined agent and tills if applicables   (NOTE: Registrined Agent signature required when reinstating)   DATE	Signature   Signature, typed or printed name of registrord aport and title if applicable   (NOTE. Registrord Aport signature required when reinstating)   DATE	11. Pursuant	to the provisions of Sections 617.05	502 and 617.1508, Florida Statutes	s, the above-named of	corporation submits this statement for the purpose of changing its registered
SIGNATURE   Signature, typed or printed name of registrined agent and title if applicables   (NOTE: Registrined Agent signature required when reinstating)   DATE	Signature   Signature, typed or printed name of registrord aport and title if applicable   (NOTE. Registrord Aport signature required when reinstating)   DATE	agent. I a	m familiar with, and accept the obli	igations of, Section 617.0503, Flor	ida Statutes.	oration's board or directors. I hereby accept the appointment as registered
12.	Signature, typed or principle depressed agent and title if applicables   (NOTE: Projected Agent signature required when reinstaling)   DATE				•	
TITLE	TITLE				Registered Agent signature r	required when reinstaling) DATE
NAME   EDWARDS, DOUG   12 NAME   12 O E STATE ST   13 STREET ADDRESS   12 O E STATE ST   13 STREET ADDRESS   14 CMY - ST - 2P	NAME   EDWARDS, DOUG   12 NAME   120 E STATE ST   1.3 STREET ADDRESS   1.20 E STATE ST   1.3 STREET ADDRESS   1.20 E STATE ST   1.4 CITY - ST - 20P	·				
120 E STATE ST	120 E STATE ST	1 1	_	☐ DELETE	1,1 TITLE	Li Change Li Addition
OLDSMAR FL	OLDSMAR FL	NAME			1.2 NAME	
DELETE   Change   Addition	DELETE   D	STREET ADDRESS			1.3 STREET ADDRESS	
NAME   GILBERT, LARRY   2.2 NAME   2.3 STREET ADDRESS   P.O. BOX 1372 N/A   P.O.	NAME   GILBERT, LARRY   2.2 NAME   2.3 STREET ADDRESS   P.O. BOX 1372 N/A   2.3 STREET ADDRESS   CITY-ST-ZIP   OLDSMAR FL   2.4 CITY-ST-ZIP				1.4 CITY - ST-ZIP	
STREET ADDRESS   P.O. BOX 1372 N/A   2.3 STREET ADDRESS   CITY-ST-ZIP   OLDSMAR FL   2.4 CITY-ST-ZIP	STREET ADDRESS	TITLE		☐ DEFELE	2.1 TITLE	☐ Change ☐ Addition
CITY-ST-ZIP	City-5t-ZiP	NAME			2.2 NAME	
DELETE   D	DELETE   D	STREET ADDRESS	P.O. BOX 1372 N/A		2.3 STREET ADDRESS	
NAME	NAME   MULVIHILL, JOHN   32 NAME   351 LAFAYETTE BLVD.   3.3 STREET ADDRESS   CITY-ST-ZIP   OLDSMAR FL   DELETE   4.1 TITLE   Change   Addition   Additi	CITY-ST-ZIP	OLDSMAR FL		2. 4 CITY-ST-ZIP	
STREET ADDRESS OLDSMAR FL 3.3 STREET ADDRESS OLDSMAR FL 3.4 CITY-ST-ZIP TITLE D AME BURNS, MARNE 4.2 NAME STREET ADDRESS OLDSMAR FL 4.3 STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 4.4 CITY-ST-ZIP  TITLE D Change Addition NAME SCHROEDER, DAVID STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D Change Addition STREET ADDRESS CITY-ST-ZIP TITLE CHANGE SCHROEDER, DAVID STREET ADDRESS CITY-ST-ZIP TITLE CHANGE CHANGE CHANGE CHANGE CHANGE CHANGE CHANGE CHANGE Addition CHANGE CH	STREET ADDRESS   351 LAFAYETTE BLVD.   3.3 STREET ADDRESS   OLDSMAR FL   3.4 CITY-ST-ZIP     TITLE	TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
CITY-ST-ZIP	CITY-ST-ZIP	NAME	MULVIHILL, JOHN		3.2 NAME	
TITLE D DELETE 4.1 TITLE	TITLE	STREET ADDRESS	351 LAFAYETTE BLVD.		3.3 STREET ADDRESS	
TITLE D GELETE 4.1 TITLE GRANGE Addition  NAME BURNS, MARNE STREET ADDRESS 100 STATE ST OLDSMAR FL 4.3 STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.1 TITLE D GELETE 5.1 TITLE SCHROEDER, DAVID STREET ADDRESS 3176 WINDMOR DR STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE GELETE 6.1 TITLE GENAME STREET ADDRESS STREET ADDRESS STREET ADDRESS GETT-ST-ZIP OLDSMAR FL GENAME GENAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TITLE   D	CITY-ST-ZIP	OLDSMAR FL		3.4. CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP OLDSMAR FL A4. CITY-ST-ZIP TITLE D SCHROEDER, DAVID STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.1 TITLE SCHROEDER, DAVID STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS	STREET ADDRESS   100 STATE ST	TITLE	D	DELETE		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP OLDSMAR FL A4. CITY-ST-ZIP TITLE D SCHROEDER, DAVID STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.1 TITLE SCHROEDER, DAVID STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS	STREET ADDRESS   100 STATE ST	NAME	BURNS, MARNE		4, 2 NAME	
CITY-ST-ZIP	CITY-ST-ZIP	STREET ADDRESS			4.3 STREET ADDRESS	
TITLE         D         DELETE         5.1 TITLE         Change         Addition           NAME         SCHROEDER, DAVID         5.2 NAME	TITLE   D	CITY-ST-ZIP			•	
SCHROEDER, DAVID  STREET ADDRESS 3176 WINDMOR DR 5.3 STREET ADDRESS CITY-ST-ZIP OLDSMAR FL 5.4 CITY-ST-ZIP  DELETE 6.1 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS	NAME   SCHROEDER, DAVID   5.2 NAME			☐ DELETE		Change Addition
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CITY-ST-ZIP OLDSMAR FL 5.4 CITY-ST-ZIP  TITLE	CITY-ST-ZIP         OLDSMAR FL         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE         Change Addition		-			
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NAME  STREET ADDRESS  6.2 NAME  6.3 STREET ADDRESS				DELETE		Channe Addition
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes I further certify that the information	14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	14. I hereby o	ertify that the Information supplied	with this filing does not qualify for	the exemption stated	in Section 119.07(3)(i). Florida Statutes. I further certify that the information

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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.
D. EDW AND 5

SIGNATURE:

ZAWANAN DURENOW T

1-8-98

813-855-5433