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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

City & State City & State City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees Zip Country Zip Country State 6. Election Campaign Financing Trust Fund Contribution Added to Fees Added to Fees	•	1996		DIVISION OF CORPORATIONS											
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MARCIA, CARSON 416 N. PINE MEADOWS DR. DEBARY FL 32713 83 64 Oily FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Floridal Statutes, the ebove-rended operation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floridal, Such change was authorized by the corporation's board of directors. I hardby accept the appointment as registered office or registered agent, or both, in the State of Floridal, Such change was authorized by the corporation's board of directors. I hardby accept the appointment as registered office or registered agent, or both, in the State of Floridal, Such change was authorized by the corporation's board of directors. I hardby accept the appointment as registered office or registered agent, or both, in the State of Floridal, Such change was authorized by the corporation's board of directors. I hardby accept the appointment as registered office or registered agent, or both, in the State of Floridal, Such change was authorized by the corporation's board of directors. I hardby accept the appointment as registered office or registered office or registered office or registered agent, or board of directors. I hardby accept the appointment as registered office or registered office or registered agent, or board of directors. I hardby accept the appointment as registered office or registered agent. I am for the purpose of change in the provision's board of directors. I hardby accept the appointment as registered office or registered agent. I am for the purpose of change in the provision's board of directors. I hardby accept the provision's purpose of change was authorized office or registered office or registered office or registered agent. I am for the purpose of change in the provision's purpose of change was authorized of directors. I hardby accept the provision's purpose of change was authorized of directors. I hardby accept the purpose of change in the provision's purpose of change was authorized	24		Address of Corre		Arant	30									
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11. Fursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above named occoporation 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. I am familiar with, and accept the obligations of, Section 617.0502. Priorida Statutes. ISGNATURE Signature							Ĺ.	Street	Address	5 (F.O. DOX 1	AUTHOR IS TAUL?		") —————		
11. Fursuant to the provisions of Sections 617,0502 and 617,1508, Fiorida 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, I am familiar with, and accept the obligations of, Sciotion 617,0502, Florida Statutes, Florida Statutes, Broad 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 a general corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with a general agent, I am familiar with a general agent, I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of changing is registered agent. I am familiar with a general agent of the purpose of change agent. I am familiar with a general agent of the purpose of change agent. I am familiar with a general agent of the purpose of change agent. I am familiar with a general agent of the purpose of change agent. I am familiar with a general agent of the appointment agent agent of the agent agent of the purpose of change agent and the purpose of change agent agent agent of the purpose of change agent ag	DEBARY	FL 32713													
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 Provisions, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am provisions of Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE POFICERS AND DIRECTORS 1.1 TITLE POFICERS AND DIRECTORS 1.1 TITLE POFICERS AND DIRECTORS 1.2 NAME A16 N. PINE MEADOW DR 1.3 STREET ADDRESS CITY-S1-ZP DEBARY FL 2.4 CITY-S1-ZP DEBARY FL 2.4 CITY-S1-ZP DEBARY FL 2.4 CITY-S1-ZP DEBARY FL 3.3 CITY-S1-ZP CITY-S1-ZP DEBARY FL 2.4 CITY-S1-ZP DEBARY FL 3.3 STREET ADDRESS CITY-S1-ZP DEBARY FL 3.4 CITY-S1-ZP DEBARY FL 3.5 STREET ADDRESS CITY-S1-ZP DEBARY FL 3.5 STREET A							84	City					CI	85 Zip	Code
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Street address Stre	or register familiar wit	ed agent, or both, th, and accept the	in the State of Florid obligations of, Secti	la. Such char on 617.0503,	ige was authoriz Florida Statutes	ed by the	corp	oration's	board o	of directors.	hereby accept	the appoi	ntment as	registered	agent. I am
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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			AVE						56	ajalina	a Osive	13			
	14. I do hereb	v certify that the in	formation supplied v	vith this filing	is voluntarily furn	ished and	d doe	s not qua	alify for t	he exemptio	n stated in Sec	tion 119.0	7(3)(k), Fk	orida Statuti	es. I further

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CARSON 4-12-96 648-5393

CR2E037 (12/95)