FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

	Applied For Not Applicable 5 Additional Page Required May Be led to Fees Per s. 199.032, Zip Code
SUITE 101 DELRAY BEACH FL 33483 US 2a. Mailing Address 2b. Mailing Address 2c. Mailin	Applied For Not Applicable 5 Additional Page Required 00 May Be led to Fees er s. 199.032, Zip Code
2. Principal Place of Business 2. Applied F 65-0169781 2. Sulte, Apt. #, etc. 2. Sulte, Apt. #, etc. 2. City & State City & State City & State 2. Country 2. Principal Place of Business 2. Applied F 65-0169781 Sulte, Apt. #, etc. 3. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing 7. Trust Fund Contribution 7. Added to Feet 8. This corporation has liability for intangible tax under s. 199.0 8. This corporation has liability for intangible tax under s. 199.0 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 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 regist 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.	Applied For Not Applicable 5 Additional Page Required 00 May Be led to Fees er s. 199.032, Zip Code
Sulte, Apt. #, etc. Sulte	5 Additional e Required 00 May Be led to Fees er s. 199.032, Zip Code
Solution City & State Trust Fund Contribution Added to Feet Added to Feet Trust Fund Contribution Added to Feet Added to Feet Trust Fund Contribution Added to Feet Added to Feet Trust Fund Contribution Trust Fund Contribution Added to Feet Trust Fund Contribution Trust Fund Contri	OO May Be led to Fees er s. 199.032,
City & State Country Country Country Country Country Country Country R. This corporation has liability for intangible tax under s. 199.0 Florida Statutes Florida Statutes Florida Statutes No Name and Address of New Registered Agent ROSTRUB, DARLENE SUITE 101 DELRAY BEACH FL 33483 R4 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 regist 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 of the corporation of the purpose of the appointment as registered agent.	er s. 199.032, Zip Code
28	er s. 199.032, Zip Code
25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KOSTRUB, DARLENE 551 SE 6TH STREET SUITE 101 DELRAY BEACH FL 33483 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named 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.	Zip Code
\$ Name and Address of Current Registered Agent 81 Name	ng its registered
KOSTRUB, DARLENE 551 SE 6TH STREET SUITE 101 DELRAY BEACH FL 33483 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 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 register	ng its registered
551 SE 6TH STREET SUITE 101 DELRAY BEACH FL 33483 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 regist 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.	ng its registered
551 SE 6TH STREET SUITE 101 DELRAY BEACH FL 33483 64 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 regist 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.	ng its registered
DELRAY BEACH FL 33483 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 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.	ng its registered
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 regist 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, or both, in the State of Florida.	ng its registered
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 regist 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.	ng its registered I as 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	l as registered
SIGNATURE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	TODO 111 40
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TIPLE D DELETE 1.1 TIPLE D Change A	
NAME SPILLIAS, KEN 1.2 NAME	ge
STREET ADDRESS 250 AUSTRALIAN AVE. S. 1.3 STREET ADDRESS	
CITY-ST-ZIP WEST PALM BEACH FL 1.4 CITY-ST-ZIP	1
TITLE DVP DELETE 2.1 TITLE DP Change A	ge Addition
NAME PICKARD, DANA 22 NAME	İ
STREET ADDRESS 250 ROYAL PALM WAY 2.3 STREET ADDRESS	ļ
CITY-ST-ZIP PALM BEACH FL 2.4 CITY-ST-ZIP	ige Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE BURGER, MARK 32 NAME 33 STREET ADDRESS 470 Columbia Dr., Suite Dr. 34 CITY-ST-ZIP WEST PALM BEACH FL 34 CITY-ST-ZIP Uest Palm Search, FL 33 ton-1 Change A	he Danil
CITY-ST-ZIP WEST PALM BEACH FL 33+09-1	·~ ~ ~~
TITLE DP DELETE 4.1 TITLE D Change A	409-1949
NAME MILLION, MARCI 4.2 NAME	4-09-1949 ge □ Addition
STREET ADDRESS 3333 S. CONGRESS AVE. 4.3 STREET ADDRESS	469-1949 ge
CITY-ST-ZIP DELRAY BEACH FL 44 CITY-ST-ZIP	ge Addition
NAME PARKS, GORDON 5.2 NAME	
STREET ADDRESS 1500 GATEWAY BLVD., MS 29 5.3 STREET ADDRESS	
CITY-ST-ZIP BOYNTON BEACH FL 5.4 CITY-ST-ZIP Change KLA	ige Addition
CITY-ST-ZIP BOYNTON BEACH FL 54 CITY-ST-ZIP	nge Addition

14. I do 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 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.

FILED

Apr 25 1997 8:00am

Secretary of State