## 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

DOCU 1. Corporation	MENT # <b>N38323</b>	3 (4)			
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Principa! Plac	e of Business	Mailing Address			
	HPOINT DR S	6622 SOUTHPOINT DR	S		
SUITE 210  SUITE 210  JACKSONVILLE FL 32216  SUITE 210  JACKSONVILLE FL 32216					
		PHONOGRAPHE TE GEE	10	3. Date Incorporated or Qualified 05/24/1990	3a. Date of Last Report 05/01/1995
	lace of Business	2a. Maling Address		4. FEI Number	Applied For
21 300 Suite, Apt.	o Sawgrass Village Cr	26 13000 Sawe	<u>jassVillage Cr</u>	59-3013434	Not Applicable
22 Suit		Suite, Apt. #, etc. 27 Suite 11	•	5. Certificate of Status Desired	\$8.75 Additional
City & Stat	e	City & State		6. Election Campaign Financing	Fee Required
	Vedra Beach, FL		a Beach, FL	Trust Fund Contribution	\$5.00 May Be Added to Fees
24 370	82 25 St Johns	29 32082	30 St. Johns	This corporation has liability for in Florida Statutes	tangible tax under s. 199.032, Yes XNo
	9. Name and Address of Current F	legistered Agent		10. Name and Address of New Re	
			81 Namo		
	RDY, O.W. JR		82 Street Adam	ress (P.O. Box Number is Not Acceptable	0.
6622 S Suite :	Outhpoint Dr., S		13000	Sawgrass Village	circle
	210 Onville fl 32216		Suit	モリ	
JACKS	DIVVILLE PL 32216		84 City Can	te Vedra Beach	El 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502 an	d 617.1508, Florida Statute	s the above named corner	ation cultivite this etatement for the pure	ose of changing its registered office
or register	red agent, or both, in the State of Florida. ith, and accept the obligations of, Section	ouch change was authorize	ed by the corporation's boar	rd of directors. I hereby accept the appoi	ntment as registered agent. I am
SIGNATURE					
12.	Signative typed or printed name of registered again and OFFICERS AND D		t flegistered Agent's gnature religious 13.	dwwx renstatings ADDITIONS/OHANGS SITO OFFIC	DATE  FRS: AND DEFICIOUS IN 10
TITLE	DP	DELETE	1.1 TITLE	74.07.07.07.07.07.07.07.07.07.07.07.07.07.	Change Addition
NAME	MCCURDY, O.W. JR		1.2 NAME		<b>-</b>
STREET ADDRESS	6622 SOUTHPOINT DR. S 210		1.3 STREET ADDRESS   13	voo sawgrass Villa	geanle, suite
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY - ST - ZIP <b>P</b>	onte Vedra Beach	JFL 32082
TITLE	SD	DELETE	2 1 TITLE		Change
NAME	BREWER, DON		2 2 NAME	2000 Earngrass Village	O Cimia Gista II
STREET ADDRESS	6622 SOUTHPOINT DR. S., 210		2.3 STREET ADDRESS 13	ood sawgrass villag	e arcie, suite il
CITY - ST - ZIP TITLE	JACKSONVILLE FL		1 <b>1 3</b> 3		1 20 0/15
	1 111	Dheirte	2 4 CITY-ST-ZIP	onte Vedra Beach, F	T 27087
	TD MCCURDY SCOTT	DELETE	31111111	onte vedra beach, t	Change Addition
NAME	MCCURDY, SCOTT	DEFELE	3.1 THLE 3.2 NAME	one vedra beach, t	Change Addition
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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

3/27/96 904 213-1800