FILE	NOW:	FILING	FEE	IS	\$61.	25
PROFIT		THE STATE OF THE S	F1.7		DEDART	

NON CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporati	Ce of Business	ree Ministry, II	(~)							
_							3. Date Incorporated or Qualified 07/16/1990	3a. Dat	e of Last 3/03/1	Report 995
2. Principal (21	Place of Busin	ess	2a. Mailing Address			• • • • • • • • • • • • • • • • • • • •	4. FEI Number 65-0216564			Applied For
Suite, Apt	t. #, etc.		Suite, Apt. #, etc.	·						Not Applicabl 5 Additional
City & Sta	ate .		27 City & Ctate				Certificate of Status Desired		-	Required
23			City & State				Election Campaign Financing Trust Fund Contribution			May Be
Zip 24		Country 25	Zip 29	30	ntry		8. This corporation has liability for in		under s.	
	9. Name	and Address of Curre		30			Florida Statutes 10. Name and Address of New Re	Yes ☐ I		
					81 N	ame	Transcent Address of New Me	Aistate0 V	Aeur	
	, robert f				_		oss (D.O. Davidson)			
8113 18TH AVENUE EAST PALMETTO FL 34221			82 S	treet Addr	ess (P.O. Box Number is Not Acceptable)				
PALMET	TTO FL 342	21			83					
					-				r	
	_			ļ	84 C	•		FL	1 '	o Code
 Pursuant or registe 	t to the provisi	ons of Sections 617,050	12 and 617.1508, Florida Statu	tes, the abo	ve-nam	ed corpor	ation submits this statement for the purpo d of directors. I hereby accept the appoir		ging its r	egistered offic
familiar w	vith, and accep	ot the obligations of, Sec	ction 617.0503, Florida Statute	S.	orporat	ion s boar	o or directors. Thereby accept the appoin	ntment as re	egistered	agent. I am
	Signature, typed	or printed name of registered ager	nl and title if applicatio. (N	OTE: Registered	Agent sign	ature required	When reinstating)	DATE		
12.	/ n	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12
TITLE	YAMED	ROBERT F.	DELETE	1.1 TiT	LE				Change	Addition
NAME		TH AVE, EAST		1.2 NA	ME					
STREET ADDRESS	PALMET			1.3 ST	REET ADOF	RESS				
CITY-ST-ZIP TITLE	D	1011	Decem		Y-ST-ZIF					
NAME	_	ELOUISE W.	DELETE	2 1 TIT		1			Change	Addition
STREET ADDRESS		H ST. CT. WEST		22 NA						
CITY-ST-ZIP	BRADEN				REET ADDF					
TITLE	ST		DELETE	2. 4 CI	Y-ST-ZIF	<u>'</u>			Chart	FT Address
NAME	WILLARD), PATSY R.		3.7 H)				U	Change	Addition
STREET ADDRESS		AVE WEST			VIC REET ADOR	IESS				
CITY - ST - ZIP	BRADEN	TON FL			Y-ST-Zif	ſ				
TITLE	D		DELETE	4.1 TIT					Change	Addition
IAME	1	ON, RICHARD E.		4. 2 NA					~yo	
STREET ADDRESS		TH AVE. EAST			EE1 ADDR	ESS				
CITY-ST-ZIP	BRADEN	ron FL			Y-ST-ZIP					
THE	D		DELETE	5 1 TH				[]	Change	Addition
IAME	ENNIS, C			5.2 NAM	AE.	- 1	- IA A-VA		-	
TREET ADDRESS	3505 5TH			5.3 STR	EET ADDR	ESS 15	OF WILLOW OAKC	ircic	_	
CITY - ST - ZIP	BRADEN	IUN FL	. <u> </u>	5.4 CIT	1-ST-ZIP	15	RADENTON, FL	342	09	
TILE	D Charrer a	AADO ADET	DELETE	6 1 TITL	E	T			Change	Addition
IAME		MARGARET		6 2 NAM	¶E					
TREET ADDRESS		ST ST. W.		6.3 STR	eet addri	ESS				
ITY-ST-ZIP	BRADEN	ION FL		6.4 CITY	-ST-ZIP					

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 cath; 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:

3/29/96 941758 1190