FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Sultio, Apt. #, etc. Sultio, Apt. #, etc. Sultio, Apt. #, etc. Sultio, Apt. #, etc. Sultio, Apt. #, etc. Sultio, Apt. #, etc. Sultion Campaign Financing S5.00 May Be Added to Fees	CHIMFUNSHI WILDLIFE ORPHANAGE, INC. Principal Place of Business Mailing Address 800 S. U.S. HWY 1 US NO PALM 6CH FL 33408 US Principal Place of Business 22 Mailing Address Script Scr
Applied For	Addition of Purincial Place of Business Walling Address Walling Address Walling Address Walling Address Zea. Melling Address Zea. Zea. Melling Address Zea. Melling Address Zea. Zea. Zea. Melling Address Zea. Melling A
Applied For	Addition of Business Addition Accress Accress Addition Accress
SUITE 2031/2 US A FEI Number Applied For Applied Fo	SUITE 20:312 US 2. Principal Place of Business 2. Meiling Address 2. Suite, Apt. #, etc. 2. Fin pure for the strain of the provisions of Sections 617:0502 and 617:1509. 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, Suite, find our submits with statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Suite, find our submits with statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Suite find programment, and accept the obligations of Sections 617:0502 and 617:1509. 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, Suite find our submits with statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Suite finding business of the collapsing of the obligations of Sections 617:0502 and 617:1509. 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, Suite finding business of the collapsing of the obligations of the collapsing business observed of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Suite finding business observed of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Suite finding business of the collapsing business of the collapsing business of the collapsing business of the purpose of changing its registered office or registered agent, or both in the State of Florida, Suite finding business of the purpose of
JUPITER FIL 33477 US	JUPITER RL 3947 US 4. FEI NUMBER 4. FEI NUMBER 55-0261499 Not Applied For 55-0261499 Sulto, Apt. 8, etc. 55-0261499 Sulto, Apt. 8, etc. Sulto, Apt. 8, etc. Sulto, Apt. 8, etc. Sulto, Apt. 8, etc. City & State City & State City & State Zip Country Zip
2. Principal Place of Business 2. Amelling Address 2. Principal Place of Business 2. Amelling Address 2. STANDAN ST. 2. Sulfa, Apt. #, etc. Sulfa, Apt. #,	2. Principal Place of Business
2. Principal Place of Dutainoss 2. Jun April 9, etc. 2. Sulte, Apt. 9, etc. 3. Sulte, Apt. 9, etc. 4. Sulte, Apt. 9, etc. 5. Certificate of Status Desired Space and Added to Pees Added to Pe	2. Principal Place of Business 2a. Melling Address 27. S. Immer St. 5. Certificate of Status Desired
Suite, Apt, etc. Suite, Apt, etc. Suite, Apt, etc. Suite, Apt, etc. South,	Sulle, Apt. #, etc.
Trust Fund Contribution	City & State
City & State 23 STUNNT FLA 28 STUNNT FLA 29 STUNNT FLA 30 USA 20 Name and Address of Current Registered Agent 81 Name RAB, LORRAINE STOUDT 3732 SE. STARBOARD LANE STUART FL 34997 82 Street Address (P.O. Box Number is Not Acceptable) 83 Significant fla 29 Street Address (P.O. Box Number is Not Acceptable) 84 City STUNNT FL 39 STUNNT FL 30	City & State City & State City & State T. Is this nonprofit corporation a homeowners association? The Country The Co
Zip Country	Zip Country Zip Country Zip Country Zip Country Zip Country Zip Zi
Personal Property Tax due June 30.	24 34 97 25 USN 29 3491 30 USN Personal Property Tax due June 30.
RAAB, LORRAINE STOUDT 3732 S.E. STARBOARD LANE STUART FL 34997 11. Pursuant to the provisions of Sections 617.0502 and 617.1505, 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 experiment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the experiment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the experiment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the experiment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the experiment for the purpose of changing its registered agent agen	RAAB, LORRAINE STOUDT 3732 S.E. STARBOARD LANE STUART FL 34997 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 exporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of 17.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the deligations of 17.0502 planeter tradutes. SIGNATURE Stopphyre, typical or prixed name of registered Agent agreature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 1.5 ITILE DOWNEY, LAURIE 1.5 STREET ADDRESS 79 RITZ COVE 1.5 STREET ADDRESS 79 RITZ COVE 1.5 STREET ADDRESS 6 PAXFORD LANE STREET ADDRESS 6 PAXFORD LANE STREET ADDRESS 6 PAXFORD LANE BOYNTON BCH. FL DELETE 1.4 LTITLE DELETE 3.1 TITLE DELETE 3.2 SIMPLESS CHANGE Change Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO DELETE Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO DELETE Addition ADDITIONS/CHANGES TO DELETE Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO DELETE ADDITIONS/CHANGES TO DELETE Addition A
RAAB, LORRAINE STOUDT 3732 S.E. STARBOARD LANE STUART FL 34997 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 exportation's board of directors. I hereby accept the appointment as registered agent, and accept the obligatioper "Section 617.0502" Blanket Statutes. SIGNATURE Signate Medical provided when industrical by the provided when or registered agent, and accept the obligatioper "Section 617.0502" Blanket Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 12. WINE DOWNEY, LAURIE 12. MMAE STREET ADDRESS 79 RITZ COVE 13. STREET ADDRESS 79 RITZ COVE 13. STREET ADDRESS 79 RITZ COVE 14. STREET ADDRESS 79 RITZ COVE 14. STREET ADDRESS 79 RITZ COVE 15. STREET ADDRESS 75 RITZ COVE 15. STREET AD	RAAB, LORRAINE STOUDT 3732 S.E. STARBOARD LANE STUART FL 34997 82 Street Address (P.O. Box Number is Not Acceptable) 83
3732 S.E. STARBOARD LANE STUART FL 34997 84 City	3732 S.E. STARBOARD LANE STUART FL 34997 83 84 City FL 88 Zip Code Apart 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 eerporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligationer of registered agent, and accept the obligationer of registered agent agent, and accept the obligationer of registered agent, and accept the obligationer of registered agent
STORNT FE 34997	11. Pursuant to the provisions of Sections 617.0502 and 617.1503, Florida Statutes, the above-named corporation submits this statement for the pursue of difference of registered agent, or both, in the State of Florida. Such change was authorized by the eerporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of 7.0503, Elevital Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 1.1 TITLE DOWNEY, LAURIE 1.2 STREET ADDRESS CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP MONARCH BEACH CA 92629 1.5 STREET ADDRESS CITY-ST-ZIP MOON, CAROLE 2.2 MAME STREET ADDRESS GITY-ST-ZIP BOYNTON BCH. FL DELETE 3.1 TITLE D Change Addition NAME RAAB, LORRAINE STOUDT STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 3.1 TITLE Change Addition NAME RAAB, LORRAINE STOUDT STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 TITLE DELETE 4.1 TITLE Change Addition Addition AME Change Addition Addition AME ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition Addition AMAGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition Addition AMAGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
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 his registered office or registered agent, or both, in the State of Florida. Such change was authorized by the exponition of directors. I hereby accept the appointment as registered office or registered agent, and accept the obligations of Sections (17.0502), portion for 17.0503, portion of 17.0503, po	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 exproration's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of 7.0503, Elorida Statutes. SIGNATURE Signature, typid or private name of registered spentare title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 1.1 TITLE DOWNEY, LAURIE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 79 RITZ COVE 1.3 STREET ADDRESS 79 RITZ COVE 1.4 CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP TITLE D D DELETE 2.1 TITLE D Change Addition NAME NOON, CAROLE 5.2 NAME STREET ADDRESS 6 PAXFORD LANE 5.7 STREET ADDRESS 5.7 STREET ADDRESS 6 STR
SIGNATURE Signyum, fysic or private name or registered agent and file if upplicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 79 RITZ COVE 1.2 NAME STREET ADDRESS TOP RITZ COVE 1.3 STREET ADDRESS TOP RITZ COVE 1.4 STREET ADDRESS TITLE DOWNARCH BEACH CA 92629 1.4 CITY-ST-ZIP NOON, CAROLE 2.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D D DELETE 2.1 TITLE D DELETE 3.1 TITLE D DELETE 3.1 TITLE D DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 TITLE D DELETE 3.1 TITLE D DELETE 4.1 TITLE D DELETE 4.1 TITLE Change Addition Addition Change Addition Addition Change Addition	SIGNATURE Signature, typical or printed name of registered bacal-and fills if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 1.1 ITILE 1.2 NAME STREET ADDRESS 79 RITZ COVE 1.3 STREET ADDRESS CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP TITLE D NAME NOON, CAROLE STREET ADDRESS 6 PAXFORD LANE STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL D NAME RAAB, LORRAINE STOUDT NAME STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 ITILE D Change Addition Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 ITILE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.2 ITILE 1.1 ITILE 1.2 Change Addition Addition Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Chan
SIGNATURE Signyum, fysic or private name or registered agent and file if upplicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 79 RITZ COVE 1.2 NAME STREET ADDRESS TOP RITZ COVE 1.3 STREET ADDRESS TOP RITZ COVE 1.4 STREET ADDRESS TITLE DOWNARCH BEACH CA 92629 1.4 CITY-ST-ZIP NOON, CAROLE 2.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D D DELETE 2.1 TITLE D DELETE 3.1 TITLE D DELETE 3.1 TITLE D DELETE 3.3 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 TITLE D DELETE 3.1 TITLE D DELETE 4.1 TITLE D DELETE 4.1 TITLE Change Addition Addition Change Addition Addition Change Addition	SIGNATURE Signature, typical or printed name of registered bacal-and fills if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DOWNEY, LAURIE 1.1 ITILE 1.2 NAME STREET ADDRESS 79 RITZ COVE 1.3 STREET ADDRESS CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP TITLE D NAME NOON, CAROLE STREET ADDRESS 6 PAXFORD LANE STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL D NAME RAAB, LORRAINE STOUDT NAME STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 ITILE D Change Addition Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 ITILE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.2 ITILE 1.1 ITILE 1.2 Change Addition Addition Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Chan
Signature, (tylical of period name of registered Agent alignature required when reinstating) DATE	Signature, (tytical of printed name of registered Sepant-and fills if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
Delete	TITLE D DOWNEY, LAURIE 1.1 TITLE 1.2 NAME STREET ADDRESS 79 RITZ COVE 1.3 STREET ADDRESS CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP TITLE D D DELETE 2.1 TITLE 1.3 STREET ADDRESS CITY-ST-ZIP NOON, CAROLE 2.2 NAME STREET ADDRESS 6 PAXFORD LANE 2.3 STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL 2.4 CITY-ST-ZIP TITLE D D DELETE 3.1 TITLE 1.2 Change Addition NAME RAAB, LORRAINE STOUDT 3.2 NAME STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 1.3 STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 1.4 CITY-ST-ZIP 3.4 C
NAME	NAME STREET ADDRESS CITY-ST-ZIP MONARCH BEACH CA 92629 TITLE D Change Addition NAME NOON, CAROLE STREET ADDRESS CITY-ST-ZIP NOON, CAROLE STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL D DELETE 2.4 CITY-ST-ZIP TITLE D Change Addition Addition AME RAAB, LORRAINE STOUDT STREET ADDRESS STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 DELETE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 2.2 NAME 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP STUNKT, POLLON 34996 USN TITLE Change Addition
STREET ADDRESS T9 RITZ COVE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP MONARCH BEACH CA 92629 1.4 CITY-ST-ZIP Change Addition Addit	STREET ADDRESS CITY-ST-ZIP MONARCH BEACH CA 92629 TITLE D NAME NOON, CAROLE STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL TITLE D NAME RAAB, LORRAINE STOUDT STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 TITLE D DELETE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE D DELETE 4.1 TITLE Change Addition Change Addition Add
TITLE D DELETE 2.1 TITLE	TITLE D DELETE 2.1 TITLE
NAME	NAME
STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL TITLE D RAAB, LORRAINE STOUDT STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 TITLE NAME STREET ADDRESS A4. CITY-ST-ZIP STUDIET, FLORIDA 3496 U.S.N TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME 5.1 TITLE 5.1 TITLE NAME 5.2 NAME 5.2 NAME 5.3 NAME 5.3 NAME 5.4 CITY-ST-ZIP TITLE 5.1 TITLE 5.3 NAME 5.3 NAME 5.4 CITY-ST-ZIP TITLE 5.5 NAME 5.5 NAME 5.5 NAME 5.5 NAME 5.5 NAME 5.5 NAME	STREET ADDRESS CITY-ST-ZIP BOYNTON BCH. FL D D DELETE 3.1 TITLE D Change Addition AAME STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 TITLE D Change Addition Addition AACTIY-ST-ZIP DELETE 4.1 TITLE Change Addition
CITY-ST-ZIP BOYNTON BCH. FL D DELETE 3.1 TITLE NAME RAAB, LORRAINE STOUDT STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.5 TITLE Change Addition	CITY-ST-ZIP BOYNTON BCH. FL D DELETE 3.1 TITLE NAME RAAB, LORRAINE STOUDT STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 JUPITER FL 33477 TITLE DELETE 2.4 CITY-ST-ZIP 3.1 TITLE Addition Addition Addition Addition
NAME	NAME RAAB, LORRAINE STOUDT STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 TITLE 3.2 NAME 3.3 STREET ADDRESS 22 SIM RIPA ST. 3.4 CITY-ST-ZIP STUNKT, FURLING 340dition
STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 TITLE NAME STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 DELETE JUPITER FL 33477 DELETE JUPITER FL 33477 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE JUPITER FL 33477 Addition Change Addition STREET ADDRESS CITY-ST-ZIP TITLE JUPITER FL 33477 Addition STREET ADDRESS STUDIED ST. 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 5.1 TITLE 5.1 TITLE 5.2 NAME	STREET ADDRESS 4300 S. U.S. HWY 1 SUITE 203-312 CITY-ST-ZIP JUPITER FL 33477 TITLE DELETE 4.1 TITLE 3.3 STREET ADDRESS 22 SIM REA ST. 3.4 CITY-ST-ZIP STUMET, FUDILUM 3U996 USN Change Addition
STUDIES JUPITER FL 33477 3.4. CITY-ST-ZIP STUDIES JUPICE	CITY-ST-ZIP JUPITER FL 33477 TILE 3.4. CITY-ST-ZIP STUDIET, FLORIDA 34996 USN Change Addition
TITLE DELETÉ 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETÉ 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME Addition Addition Addition	TITLE DELETE 4.1 TITLE Change Addition
STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME	
CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME	NAME 4.2 NAME
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME]
	NAME 5.2 NAME
STREET ADDRESS 5.3 STREET ADDRESS	STREET ADDRESS 5.3 STREET ADDRESS
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition	
NAME 62 NAME] """]
	STREET ADDRESS 6.3 STREET ADDRESS
5.3 STREET ADDRESS 5	CITY-ST-ZIP 6.4 CITY-ST-ZIP 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
STREET ADDRESS 0.3 STREET ADDRESS	

indicated on this annual report or supplied with this many does not quality for the exemption stated in Section 195.07(5)(f), honded Statutes. Further certify that the 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:

FILED

Jan 28 1998 8:00am

Secretary of State