NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		AFirm W. To	
DOCUMENT # N45574 (3)			\$5	JUL -5 PH 1:00	
PRIVA SOCIA	ATE RAILROAD CROSSING ATION, INC.	PAINT STREET OWN	iers as	SILANINA DI PRALIDIRI DIRI DIRI DIRI DIRI DIRI DIRI DIR	
Principal Place		Mailing Address			6461 61641 61611 61611 61611 61611 61611 1661
SUITE 201 VIERA FL 32940		7380 MURRELL ROAD Suite 201 Viera Fl 32940		Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		10/02/1991 4. FEI Number	05/01/1995 Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-3114317	Not Applicable \$8.75 Additional
22 City & State	9	City & State		5. Certificate of Status Desired	Fee Required
23 Zip	Country	28 Zip	Court	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25 9. Name and Address of Currer	29	Country 30	This corporation has liability for in Florida Statutes Name and Address of New Re	Yes No
7380 N SUITE VIERA 11. Pursuant t office or re agent. I ar SIGNATURE	FL 32940		83 84 City	poration submits this statement for the pulion's board of directors. I hereby accept	FI 85 Zip Code
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
NAME STREET ADORESS CITY-ST-ZIP	Blake, R. Mason 7380 Murrell RD, STE 20 Viera FL	DELETE	1.7 TITLE 1.2 NAME 1.3 STREET ADDRESS		Change Addition
TITLE NAME STREET ADDRESS	D HOUSER, DAVID W. 270 PAINT ST. ROCKLEDGE FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	רוכוכול	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	D SCHENCK, JAY BEELINE INDUSTRIAL PARK COCOA FL	DELETE	2 4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		25 4 9998 1 Million
CITY ST ZIP		DELETE	4.1 TITLE 4.2 NAME	0.00	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	0,6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE		0,6	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	lify for the exemption stated in Section 1 and accurate and that my signature shall d to execute this report as required by C	Change Addition Change Addition