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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

		
DOCUN 1. Corporation	MENT Name	- #

FILED Jun 20 1997 8:00am Secretary of State

	ce of Business	Mailing Address			-	
•						
1019	3. Goldwyn Avenua ado FL 32805-4	e (SAn	nE)			
DALL	12 FL 33805-4	1305				
O THANK O TO DESCRIPTION				3. Date Incorporated or Qualified	3a. Date of Last Report	
2. Principal Place of Business 2a. Mailing Address		s		11/06/94	04/07/96	
21 26		o .		59-30/1754	Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Ç.			¢p 75	
27				5. Certificate of Status Desired	Fee Required	
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zio	Country	28			Trust Fund Contribution	Added to Fees
Zip 24]	Country 25	Zip 29	—	intry	8. This corporation has liability for in	
(9)	9. Name and Address of Currer		30	1	Florida Statutes 10. Name and Address of New Reg	Yes No
D -		Name of the state of the		81 Name	Ter Hame and Address of Hew Heg	iereien Wähilf
Drie	9ht, Rudolph					
349	1 (0)			82 Street Add	ress (P.O. Box Number is Not Acceptable	9)
	ght, Rudolph 1 Colwyn Court ando FL 32812			83		
Or/a	ndo FL 32812			B4 City	Miles III	[a,] 7 . 6 . t
				[]		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617,050	32 and 617.1508, Florida	Statutes, the a	bove-named corr	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing its registered
agent I a	am familiar with, and accept the oblig	ations of, Section 617.056	D3, Florida Sta	a by the corporat tutes:	tion's board or directors. I hereby accept	the appointment as registered
SIGNATURE .						
12,	Signature, typed or printed name of registered age			d Agent signature requi		DATE
TITLE	· · · · · · · · · · · · · · · · · · ·	D DIRECTORS DELET	13. E 1.1 TI	TIF	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	Jackson, Doris	•	1.2 N			C Change C Addition
STREET ADDRESS	6100 Holiday Hi	11 Lane		IREET ADDRESS		
CITY-ST-ZIP	Orlando FL			TY-ST-ZIP		
TITLE	rc	☐ DELET				
	A			i LL		Change Addition
NAME	HICEMS, Elaine		22 N			Change Addition
	126 Domino St	reed				Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	Alkens, Elaine 126 Domino str Orlands Fe 3.	2805	23 ST	AME		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE	Orlands Fr 3.	2805	23 ST	AME Treet address HTY-ST-ZIP		Change Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Splexander, Sh 508 Betsy Ros	DELET □ DELET	2 3 S1 2 4 C E 3.1 TI 3.2 N/ 3.3 S1	AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS		
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