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NONPROFIT **CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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	160			160	160					3	 Date Incorporated or Qualified 07/06/1992 	u		
CLEARWATER FL 34624				_	CLEARWATER FL 34624 US					4	FEI Number		I IA	pplied For
I	00			03							59-3135928			lot Applicable
2. Principal Place of Business 21				2a. 26	2a. Mailing Address 26					5	5. Certificate of Status Desired			Additional lequired
Suite, Apt. #, etc.				_	Suite, Apt. #, etc.					6	3. Election Campaign Financing			May Be
I	22 City & State			27	City & State					+_	Trust Fund Contribution	<u>. U.</u>	Added	
City & State				28	City & State					7	7. Is this nonprofit corporation a		ors association	on?
I	Zip		Country	201	Zip		Count	try		R	. This corporation owes or has			ntangible
ı	24		25	29	r	30]			"	Personal Property Tax due Jui	•		□ No
Ì		9. Name	and Address of Curre	ent Regis	tered Agent					10). Name and Address of New I	Registered	l Agent	
I							8	H L	Name					
I		i, paul jf					ē	2 5	Street Add	ess ((P.O. Box Number is Not Accept	table)		
I		BAY DRIV	E											
I	SUITE 1						*	13						
I	CLEARM	VATER FL	34624				8	4 (City		· · · · · · · · · · · · · · · · · ·	FI	85 Zip	Code
	11 Purtuant	In the provis	sions of Sections 617 Of	502 and 6	17 1508 Florida Ste	ahilas 1	the abo	We-n	amed corr	oreti	ion submits this statement for the			its registered
	office or re	egistered a	gent, or both, in the Sta	te of Floric	da. Such change w	as auth	orized	by th	e corpora	tion's	ion submits this statement for the board of directors. I hereby acc	cept the ap	pointment a	s registered
		m iamiliai w	A accept the boil	igations or	, Section 617.0303,	, Florios	a Siaiu	108.						
	SIGNATURE _	Signature, types	d or printed name of registered a	gent and title	f applicable (I	(NOTE: Re	oletered A		ionature requi	red wh	en reinetating)	DATE		
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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 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:

98 352-382-1362

FILED

Mar 31 1998 8:00am

Secretary of State