FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1997 8:00am

Secretary of State

Sandra 6. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Corporatio	on Name	# N49729 SERVICES INC.	9 (9)			E 18 BENDE DI DENDE INVESTIGATE HAND E			
Principal Plac	e of Busines	SS	Mailing Address						
115 SW 41ST ST. P.O. BOX 361 GAINESVILLE FL 32607 GAINESVILLE FL 32602-0361				81					
					•	3. Date Incorporated or Qualified		of Last F	
2. Principal P	Place of Busin	ness	2s. Mailing Address			07/07/1992 4. FEI Number	W	/19/199	plied For
Suite. Apt. #, etc. 22 City & State			Suite, Apt. #, etc. 27 City & State			59-3165454			ot Applicable
						5. Certificate of Status Desired	ĸ	\$8.75 Additional Fee Required	
						6. Election Campaign Financing \$5.00 May Be			
23			28			Trust Fund Contribution			to Fees
Zip		Country	Zip	Coul	ntry	8. This corporation has liability for			199.032,
24	9. Name	25 and Address of Curren	29 t Registered Agent	30		Florida Statutes L 10. Name and Address of New Re	Yes Ag		
·		· · · · · · · · · · · · · · · · · · ·			61 Name				·····
	N, GERTH	A LEE		ł	B2 Street Add	dress (P.O. Box Number Is Not Acceptal	ble)	·····	-h-i
	. 8TH PL.								····
GAINESV	/ILLE FL			i	63				
				1	84 City		FL	85 Zip	Code
11. Pursuant office or r	registered ac	nent, or both, in the State	of Florida, Such change was	ites, the ab	ove-named cor	rporation submits this statement for the patient's board of directors. I bereby access	purpose or cr	ntment se	registered
11. Pursuant office or r agent. La SIGNATURE		gent, or both, in the State ith, and accept the obligator or protections of registered agert				rporation submits this statement for the pation's board of directors. I hereby accelulated when reinstating)	purpose of cr pt the appoir	ntment as	registered
SIGNATURE	Signature, typed		nt and title if applicable. (NC				DATE		
SIGNATURE:	Signature, typed	or printed name of registered age OFFICERS AND	nt and title if applicable. (NC	TE: Registered	Agent signature requ	uired when reinstating)	DATE CERS AND D		
SIGNATURE 12. TILLE NAME	DS JOHNSO	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B.	nt and title if applicable. (NC	TE: Registered 13. 1.1 TiT 1.2 NA	Agent signature requ	uired when reinstating)	DATE CERS AND D	DIRECTOR	RS IN 12
SIGNATURE: 12. TITLE NAME STREET ADDRESS	DS JOHNSO 2130 NW	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE.	nt and title if applicable. (NC	13. 1.1 TIT 1.2 NA 1.3 STI	Agent signature required LE ME REET ADDRESS	uired when reinstating)	DATE CERS AND D	DIRECTOR	RS IN 12
SIGNATURE 12. TITLE NAME	DS JOHNSO	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE.	nt and title if applicable. (NC	13. 1.1 TIT 1.2 NA 1.3 STI	Agent signature required to the signature requirement of the signature req	uired when reinstating)	DATE CERS AND D	DIRECTOR	RS IN 12
SIGNATURE: 12. TILE NAME SIREET ADDRESS CITY-ST-ZIP	DS JOHNSO 2130 NM GAINESV	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE.	nt and title if applicable (NC O DIRECTORS DELETE	13. 1.1 TiT 1.2 NA 1.3 STI	Agent signature required to the signature requirement of the signature req	uired when reinstating)	DATE CERS AND D	DIRECTOR Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE.	nt and title if applicable (NC O DIRECTORS DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 1.4 CIT 2.1 TiT 2.2 NA	Agent signature required to the signature requirement of the signature req	uired when reinstating)	DATE CERS AND D	DIRECTOR Change	RS IN 12
SIGNATURE: 12. TILE NAME STREET ADDRESS CITY-ST-7IP TILE NAME STREET ADDRESS CITY-ST-7IP	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE.	nt and title if applicable (NC D DIRECTORS DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 1.4 CIT 2.1 TiT 2.2 NA 2.3 STI 2.4 CIT	Agent signature required to the signature requirement of the signature req	uired when reinstating)	DATE CERS AND D	DIRECTOF Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DS JOHNSO 2130 NM GAINESV JOHNSO 2130 NM GAINESV DT	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL	nt and title if applicable (NC O DIRECTORS DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 1.4 CIT 2.1 TiT 2.2 NA 2.3 STI 2.4 CIT 3.1 TiT	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOR Change	RS IN 12
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L.	nt and title if applicable (NC D DIRECTORS DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 2.1 TiT 2.1 TiT 2.2 NA 2.3 STI 2.4 CI 3.1 TiT 3.2 NA	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change	RS IN 12 Addition Addition
SIGNATURE: 12. TILE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. 8TH PL.	nt and title if applicable (NC D DIRECTORS DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 2.1 TiT 2.2 NA 2.3 STI 2.4 CI 3.1 TiT 3.2 NA 3.3 STI	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change	RS IN 12 Addition Addition
SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. 8TH PL.	nt and title if applicable (NC D DIRECTORS DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 2.1 TiT 2.2 NA 2.3 STI 2.4 CI 3.1 TiT 3.2 NA 3.3 STI	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change	RS IN 12 Addition Addition
SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. 8TH PL. VILLE FL ON, CHARLES R.	D DELETE DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 2.1 TiT 2.2 NA 2.3 STI 2.4 CI 3.1 TiT 3.2 NA 3.3 STI 3.4 CI	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. 8TH PL. VILLE FL	D DELETE DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 1.4 CFI 2.1 TiT 2.2 NA 2.3 STI 2.4 CFI 3.1 TiT 3.2 NA 3.3 STFI 4.1 TiT 4.2 NA	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. 8TH PL. VILLE FL ON, CHARLES R.	DELETE DELETE DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT	Agent signature required to the signature requirement of the signature req	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. VUHALA ST.	D DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CH 2.1 TIT 2.2 NA 2.3 STI 2.4 CH 3.1 TIT 3.2 NA 3.3 STF 3.4 CH 4.1 TIT 4.2 NA 4.3 STF	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D FOXWOR	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. OTHALA ST.	DELETE DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.2 NA 2.3 STI 2.4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NA	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE: 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D FOXWOF 1907 SE	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. UHALA ST. RTH, WILLA D. 13 PL.	DELETE DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CM 2.1 TIT 2.2 NA 2.3 STI 2.4 CC 3.1 TIT 3.2 NA 3.3 STE 3.4 CC 4.1 TIT 4.2 NA 4.3 STE 4.4 CM 5.1 TIT 5.2 NAI 5.3 STE	LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS RY-ST-ZIP LE ME REET ADDRESS RY-ST-ZIP LE ME REET ADDRESS	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D FOXWOR	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. UHALA ST. RTH, WILLA D. 13 PL.	DELETE DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CM 2.1 TIT 2.2 NA 2.3 STI 2.4 CC 3.1 TIT 3.2 NA 3.3 STE 3.4 CC 4.1 TIT 4.2 NA 4.3 STE 4.4 CM 5.1 TIT 5.2 NAI 5.3 STE	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE: 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D FOXWOF 1907 SE	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. UHALA ST. RTH, WILLA D. 13 PL.	DELETE DELETE DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.2 NA 3.3 STI 4.1 TIT 4.2 NA 4.3 STI 4.1 TIT 5.2 NAI 5.3 STI 5.4 CIT 5.3 STI 5.4 CIT 5.4 CIT	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME	DS JOHNSO 2130 NM GAINESV D JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D FOXWOF 1907 SE	OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. UHALA ST. RTH, WILLA D. 13 PL.	DELETE DELETE DELETE DELETE DELETE DELETE	13. 1.1 TiT 1.2 NA 1.3 STI 1.4 CiT 2.1 TiT 2.2 NA 2.3 STI 2.4 CiT 3.1 TiT 4.2 NA 4.3 STI 4.2 CiT 5.1 TiT 5.2 NA 5.3 STI 5.4 CiT 6.1 TiTI 6.2 NAI	Agent signature required to the signature re	uired when reinstating)	DATE CERS AND D	DIRECTOF Change Change Change Change	Addition Addition Addition Addition
SIGNATURE: 12. TILE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JOHNSO 2130 NM GAINESV DT JOHNSO 2233 SE GAINESV DP JOHNSO 91-905 P HAWAII D FOXWOR 1907 SE GAINESV	OFFICERS AND OFFICERS AND OFFICERS AND ON, RICHARD B. V 31 AVE. VILLE FL ON, KAREN K. DUNBAI V 31 AVE. VILLE FL ON, GERTHA L. OTH PL. VILLE FL ON, CHARLES R. OTHALA ST. OTHALA ST. OTHALA ST. OTHALA D. OTHALA FL OTHALA FL	DELETE DELETE DELETE DELETE DELETE DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 5.1 TITI 5.2 NAI 6.3 STI 6.4 CIT 6.1 TITI 6.2 NAI 6.3 STI 6.4 CIT	LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE	uired when reinstating)	DATE CERS AND D	Change Change Change Change	Addition Addition Addition Addition Addition

SIGNATURE; MICHAEL BY LIGHT HE CHARLED RICHARD B. Johnson 4/25/97 352 312-148