FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

		DIVISION				
DOCUI 1. Corporation	MENT # N930	00005625	(9)			
MUSK	ETEERS, INC.			4 1841/4/ 8/8 18/14/ 8/4/		
Principal Place	of Butiness	Mailing Address		I leading and large triti datif and	# 8441 ##111 ##1#4 #titM #1	100 10001 Q101 UQ1
41 KINDRED AVENUE STUART FL 34994 US		41 KINDRED AVENUE STUART FL 34994 US				
				3. Date Incorporated or Qualified 12/14/1993	3a. Date of Last 04/24/	
. Principal Pl	ace of Business	2a. Mailing Address 26	7-11-11-11-11-11-11-11-11-11-11-11-11-11	4. FEI Number 65-0459300	} — →	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	3	Certificate of Status Desired		Additional
City & State	3	City & State			1-66	Required
		28		6. Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees
Zip []	Country 25	Z _I p	Country	8. This corporation has liability for i	intangible tax under s	7 70 147 14-
·	9. Name and Address of Curr		30	Florida Statutes [10. Name and Address of New R	Yes No	
			81 Name	10. Halle and House of How Fi	ogiatored Agent	
CYR, JO			82 Street Add	freds (P.O. Box Number is Not Acceptab	ile)	
	RED AVE.		83			
STUART	FL 34994		83			
			84 City		FL 85 Z	Code
familiar wit	th, and accept the obligations of, Se	ection 617.0503, Florida Stat	ionzed by the corporation's boautes.	oration submits this statement for the pur and of directors. I hereby accept the appo	pose of changing its r cintment as registered	egistered offic agent. I am
familiar wit	th, and accept the obligations of Se	ection 617.0503, Florida States to the state of the state	atutes, the above named corporation's bountes. (NSTE Registres: Agent squaturi requi	ard of directors. Thereby accept the appo	pose of changing its reintment as registered	agent. I am
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SIGNATURE:

ME OF SIGNING OFFICER OR DIRECTOR

JOHN F. CYR

05/22/96

(407)286-4480