SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N9400002635 (0)

FILED Sep 19 1997 8:00am Secretary of State

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3. Date incorporated or Qualified 05/23/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3249083 Suite, Apt. #, etc. 2b. Suite, Apt. #, etc. 27 City & State 27 City & State 28 City & State 29 29 20 20 Country 25 29 30 Country 30 Suite, Apt. #, etc. 30 Country 27 29 20 20 30 Country 40 30 Country 40 30 Country 40 30 Country 40 30 Country 50 4. Fel Number 59-3249083 6. Election Campaign Financing Trust Fund Contribution 6 Added 70 Trust Fund Contribution 6 Added 70 Trust Fund Contribution 7 Country 85.000 Added 7 Personal Property Tax due June 30 Yes 50 9. Name and Address of Current Registered Agent 70 10. Name and Address of New Registered Agent 70 11. Pursuant to the provisions of Sociolos 617.0502 and 617.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing in office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board or directors. I hereby accept the appointment agent, I am familiar with, and accept the obligations of, Socion 617.0503, Florids Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature registered when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. STREET ADDRESS SIGNATURE MALLOW, TIMOTHY J SIREET ADDRESS 3715 FELDA STREET COCOA FL 14. CITY ST. ZP MALLOW, BETH A ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY ST. ZP Change MALLOW, BETH A Change	poplied For on Applicable Additional equired May Be to Fees tangible No MAA
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	Addition

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.

9-13-97 (4)21-2027