## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

NAME STREET ADDRESS

CITY-ST-ZIP

Secretary of State
DIVISION OF CORPORATIONS

		2222222		<del></del>		
DOCU 1. Corporation	MENT # <b>N94</b> 9	000003034 (5	)			
		F CANAVERAL GROVES, I				
GNACE	DAFIISI CHUNCH UI	T CHINAVENAL GROVES, I	ING.	A 1361(13) AND 1914 BIBLO BALLI ARTIS	NICH NAME ISON MAN STATE ONE BIOLOGIC	
Principal Place	of Business	Mailing Address		E INCIDIO DIN 1811 BINDI SOLILI DELLE	BRIST MAINE BRIES WILL A BEST 19111 BIRT 1981	
3935 NO. HIGHWAY 1		3935 NO. HIGHWAY 1				
UNIT F		UNIT F				
COCOA FL 3	2526	COCOA FL 32926		3. Date Incorporated or Qualified	3a. Date of Last Report	
				06/20/1994 4. FEI Number	03/30/1995	
2. Principal Place of Business		2a. Mailing Address	<del> </del>		Applied For	
21 Suite Act H etc		26   Suite, Apt. #, etc.	26		Not Applicable	
Suite, Apt. #, etc.		<del> </del>	27		5. Certificate of Status Desired See Required \$8.75 Additional	
City & State		City & State			6. Election Campaign Financing\$5.00 May Re	
23		28	28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in		
24	25	29	30	Florida Statutes L  10. Name and Address of New Re	Yes X No	
	9. Name and Address of	Current Hegistered Agent	81 Name		egistereo Agent	
SANFORD, JAMES H.				DEALE, RANDALL D		
3616 BANNOCK ST.			82 Street	Address (P.O. Box Number is Not Acceptable	⊕)	
COCOA FL 32926						
			84 City	1707 HARBOR DR.	<b>85</b> Zip Code	
			Jony Only	MERRIT ISLAND	FL 32952	
11. Pursuant or registe	to the provisions of Sections 61 red agent, or both, in the State	7.0502 and 617.1508, Florida Statu of Florida, Such change was authori	tes, the above-named o	orporation submits this statement for the pury board of directors. Thereby accept the appo	pose of changing its registered office	
famil ar w	ith, and accept the obligations of	f, Section 617.0503, Florida Statute	S.			
SIGNATURE	Signature, typed or printed name of register	D. Scala	OTE Registered Agent signature	And a har modale of	r-27-96	
12.		RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1 1 TITLE	D	Change Addition	
NAME	SANFORD, JAMES H		12 NAME	COBB, SHIRLEY		
STREET ADDRESS	3616 BANNOCK STREE	T	13 STREET ADDRESS	670 MORE RD.	1	
CITY-ST-ZIP	COCOA FL 32926		1 4 CITY - ST - ZIP	COCOA, FL 32926		
TITLE	D DANE DANEDALL D	DELETE	2 1 TITLE		☐ Change ☐ Addition	
NAME	SEALE, RANDALL D 1707 HARBOR DRIVE		2 2 NAME			
STREET ADDRESS	MERRITT ISLAND FL 32	069	2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	D	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
NAME	COVERT, CAROL		3.2 NAME	Į.	C v sough	
STREET ADDRESS	2602 TULANE DR		3.3 STREET ADDRESS			
CITY-ST-ZIP	COCOA FL		34 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		□DELÉTE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5 2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5 4 CITY - ST - ZIP 6.1 TITLE	•	Change Addition	
1 71166	i		W. 1 >11 E.C.			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE: Randell D. SEALE D. SEALE 4.27-96 (407) 453-3293

3R2E037 (12/99