## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

## DOCUMENT # N9500001198 (9)

## EAST LAKE PRESBYTERIAN CHURCH, INC.

Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Zip  Country  Suite, Apt. #, etc.  Suite, Ap						
SUTE 117 TARPON SPRINGS R. 34899  2. Principal Pales of Business 2. Asking Astress 2. Suda, Aya 9, etc. 2. Principal Pales of Business 2. Suda, Aya 9, etc. 2. Principal Pales of Business 2. Suda, Aya 9, etc. 2. City, & State 2. Suda, Aya 9, etc. 2. City, & State 2. Tarkpon Sprinus, FL 28 2. Ta	Principal Place	of Business	Mailing Address			BBON QBON QBOOK NOON NOON NOON NOON NOON
2. Principal Patro of Business 2. Principal Patro of Business 2. Principal Patro of Business 2. Solo Server Larke Rib., N. 28 Server Larke Rib., N. 29 Server Larke Rib., N	SUITE 117		SUITE 117			
27 Cot 8 State 28 Cot 8 State 29 Cot 8 State 29 Cot 8 State 20 Cot 8 State 21 TARRON Sprives, FL. 20 TARRON Sprives, FL. 20 TARRON Sprives, FL. 20 TARRON Sprives, FL. 21 TARRON Sprives, FL. 22 TARRON Sprives, FL. 23 TARRON Sprives, FL. 24 TARRON Sprives, FL. 25 TARRON Sprives, FL. 26 Eaction Company Invariant Control State 27 Cot 8 State 28 TARRON Sprives, FL. 29 TARRON Sprives, FL. 20 TARRON Sprives, FL. 20 TARRON Sprives, FL. 20 TARRON Sprives, FL. 21 TARRON Sprives, FL. 22 TARRON Sprives, FL. 23 TARRON Sprives, FL. 24 TARRON Sprives, FL. 25 TARRON Sprives, FL. 26 State 27 TARRON Sprives, FL. 26 State 27 TARRON Sprives, FL. 27 TARRON Sprives, FL. 28 State 28 Sta	IMPON SPN	1403 FL 34003	PARTON STRINGS FE 940	05	1	3a. Date of Last Report
Suite, April 4 etc.    South	,		2a. Mailing Address 26 505 FAST FAM	KRH, N		<del> </del>
TARROW Springs   L   28   TARROW Springs   L   28   TARROW Springs   L	Suite, Apt #	k, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	11
Zip Country 2 3 46 8 7 25 4 5 8 29 3 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 46 9 30 4		• • • • • • • • • • • • • • • • • • •		us, Fr.	, ,	11 *****
1. Name and Address of New Registered Agent   1. Name and Address	Ziρ	Country				tangible tax under s. 199.032,
JOHNSON, PEYTON 40347 US HWY 19 N. SUITE 117 TARPON SPRINGS FL 34689  84 City Appendix Springs FL 34689  85 Street Address, (P.O. Box Number is for Acceptable)  86 Jin Appendix Springs FL 34689  86 City Appendix Springs FL 365 Jin Code or registered agent, or both, in the State of Florids. Suit-change was authorized by the occurrence of directors. Thereby accept the appointment as registered agent, and accept the obligation on Scholar of trouble, for interest of correctors. Thereby accept the appointment as registered agent, and accept the obligation on Scholar of trouble, front advantage with an advanced trouble of trouble, front advantage with a decent making.  SIGNATURE  PAY TON SURVINGS FL 34689  INTEL  DP  OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL  DP  Addition  NAME  KOCH, JAMES  3226 CRESCENT OAKS BLVD.  13 Isreet ADDRESS  14 City ST-2P  TARPON SPRINGS FL 34689  INTEL  DS  OFFICERS AND DIRECTORS IN 12  21 TARPON SPRINGS FL 34689  INTEL  DS  OFFICERS AND DIRECTORS IN 12  21 TARPON SPRINGS FL 34689  INTEL  DS  OFFICERS AND DIRECTORS IN 12  22 NAME  ANA  MOBILE ROBERT  STREET ADDRESS  DIV. ST-2P  PALM HARBOR FL 34685  DV ST-2P  OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DR  OFFICERS AND DIRECTORS IN 12  12 NAME  13 STREET ADDRESS  14 City ST-2P  OFFICERS AND DIRECTORS IN 12  23 NAME  1515 BAYSHORE BLVD. #35  DUNEDIN FL 34698  THE DR  OFFICERS AND DIRECTORS IN 12  TO TARPON SPRINGS FL 34681  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TO TARPON SPRINGS FL 34681  TO TARPON SPRINGS FL 34681  TO TARPON SPRINGS FL 34689  THE DR  OFFICERS AND DIRECTORS IN 12  TO TARPON SPRINGS FL 34689  THE DR  OFFICERS AND DIRECTORS IN 12  TO TARPON SPRINGS FL 34689  THE DR  OFFICERS AND DIRECTORS IN 12  TO TARPON SPRINGS FL 34689  THE DR  OFFICERS AND		9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
JOHNSON, PEYTON 40347 US HWY 19 N. SUITE 117 TARPON SPRINGS FL 34689  11. President to the provisions of Sections 617,0502 and 617,1506, Floridal Statutes, the above named corporation adminish this statement for the purpose of changing its registered difference or registered adjent, or both, in the State of Floridal Such change was authorized by the abovernamed corporation adminish this statement for the purpose of changing its registered difference or registered adjent, or both, in the State of Floridal Such change was authorized by the accompanies of and of directors. I hereby accept the appointment as registered agent, 1 and management in the purpose of changing its registered difference or registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of change agent. I and management in the purpose of changing its registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of changing its registered agent. I and management in the purpose of change agent. I and management in the purpose of change agent agent. I and management in the purpose of change in the purpose of changement in the purpose of change			OHNSON, PRYTON			
SUITE 117 TARPON SPRINGS FL 34689  11. Parsuant to the provisions of 52 declares 617 1509, Florida Statutes, the above named council and in submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the coordinate of submits in statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the coordinate of submits in statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the coordinate of submits in statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the coordinate of submits in statement for the purpose of changing its registered office or registered agent. I am hardward for the purpose of changing its registered office or registered agent. I am hardward for the purpose of changing its registered office or registered agent. I am hardward agent with the purpose of changing its registered office or registered agent. I am hardward agent with a submits its statement for the purpose of changing its registered office or registered agent. I am hardward agent with a submits its statement for the purpose of the agent	JOHNSON, PEYTON 82 Street Addre				ess (P.O. Box Number is Not Acceptable	
TARPON SPRINGS FL 34689  11. Pursuant to the protectors of Sectors 617.0502 and 617.1509. Florido Statutes, the above named condition submit its statement for the purpose of changing its registered digent or both, in the State of Rodds. South change was authorized by the congregions and of directors. Thereby accept the appointment as registered agent, I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered difference or registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit its statement for the purpose of changing its registered agent. I am submit i					S EAST LAKE!	COAD, N.
TI. Pursuant to the productors of Sections 617 0502 and 617 1509. Floods Statutes, the above named corplation submish this statement for the purpose of changing its registered office registered agent or both in the State of Floods. Such of territory was authorized by the grant of activities of the purpose of changing its registered office familiar with, and accept the obligations of, Section 617 0502, Floods Statutes.  SIGNATURE  PART OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. IT THE DP DELETE STREET ADDRESS  2200 CRESCENT OAKS BLVD.  13. SIGNATURE CONTROL OFFICERS AND DIRECTORS  14. OFFICERS AND DIRECTORS  15. IT THE DR DELETE STREET ADDRESS  2200 CRESCENT OAKS BLVD.  13. SIRECT ADDRESS  2200 CRESCENT OAKS BLVD.  13. SIRECT ADDRESS  3167 EOGEMOORE DR.  22. NAME  MOBBE, ROBERT  3167 EOGEMOORE DR.  23. SIRECT ADDRESS  3167 EOGEMOORE DR.  24. SIRECT ADDRESS  3167 EOGEMOORE DR.  24. OTTY ST-2P  PALM HARBOR FL 34685  37. OTTY ST-2P  38. OFFICERS AND DIRECTORS STREET ADDRESS  37. SIRECT ADDRESS  38. SIRECT ADDRESS  39. SIRECT ADDRESS				83		
or registered agent, or both, in the State of Florids Such change was authorized by the contration's pain of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617-1503, Florida Statutes.  SIGNATURE  PLAYTON  OFFICERS AND DIRECTORS  12.  OFFICERS AND DIRECTORS  13.  ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE  DP  CONTROL AND DIRECTORS IN 12.  THE DRAWE  SIREET ADDRESS  S226 CRESCENT OAKS BLVD.  13 SIREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  DTY. ST-2P  PALM HARBOR FL. 34685  DT. ST-2P  ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE DS  CITY-ST-2P  ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12.  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  DUNEDIN FL. 34685  DUNEDIN FL. 34698  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  STREET ADDRESS  CITY-ST-2P  DELETE  DELETE  DELETE  DELETE  STREET ADDRESS  CITY-ST-2P  DELETE  DELETE  STREET ADDRESS  STREET ADDRE				TAR		FL 34689
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DP	or registers	ed agent, or both, in the State of Florida	<ol> <li>Such change was authorized t</li> </ol>	the above-named corpora by the corporation's ocan	ation submits this statement for the purp d of directors. I hereby accept the appoi	lose of changing its registered office introduced introduced agent. I am
12. OFFICERS AND DIRECTORS  13. ADDITIONS CHANGES TO OFFICE RS AND DIRECTORS IN 12  THE DP	SIGNATURE _	PRYTON JOHNSON Synature Jued or printed name of registered agent a	nd life if applicatio (NOTE: 1	Thombson Agent sure full red	t when reinstating)	7/95 DATE
NAME STREET ADDRESS 3226 CRESCENT OAKS BLVD. TARPON SPRINGS FL 34689 11 CITY-ST-ZP  TITLE DS MANE MCBEE, ROBERT 3167 EDGEMOORE DR. CITY-ST-ZP  TITLE DT SMEET ADDRESS 1515 BAYSHORE BLVD. 435 DIVELETE  TITLE DT SMEED DS MARE STREET ADDRESS 1515 BAYSHORE BLVD. 435 DIVELETE  TITLE DT SMEED DS MARE STREET ADDRESS CITY-ST-ZP  TITLE DT SMEED DS MARE STREET ADDRESS CITY-ST-ZP  TITLE DT SMEED DELETE  TITLE DT SMEED DS MARE STREET ADDRESS CITY-ST-ZP  TITLE DT SMEED DS MARE STREET ADDRESS CITY-ST-ZP  TITLE DS MARE STREET ADDRESS CITY-ST-ZP  TITLE DELETE DELETE DELETE DELETE DELETE DELETE DELETE DT MARE STREET ADDRESS CITY-ST-ZP  TITLE DELETE				13. V	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
STREET ADDRESS CITY-ST-ZP TARPON SPRINGS FL 34689 TITLE DS MCBEE, ROBERT 3167 EDGEMOORE DR. CITY-ST-ZP TITLE DT SMEET ADDRESS CITY-ST-ZP TITLE DLEETE DELETE TITLE DELETE	T-TLE	DP	DOELETE	1 1 TITLE		Change Addition
TARPON SPRINGS FL 34689  THE  DS  DELETE  2 TITLE  2 NAME  3 167 EDGEMOORE DR. 23 STREET ADDRESS  CITY-ST-ZIP  TITLE  DT  SMEAD, ELEANOR  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  TITLE  DELETE  TITLE  DELETE  TITLE  DELETE  DELETE  TITLE  DELETE  THE  THE  DELETE  THE  DELETE  THE  THE  DELETE  THE  THE  DELETE  THE  THE  THE  THE  THE  THE  THE	NAME	KOCH, JAMES		1.2 NAME		
DELETE   DS   DELETE   21 TITLE   DS   DELETE   Addition	STREET ADDRESS		•	1 3 STHEET ADDRESS		
MCBEE, ROBERT 3167 EDGEMOORE DR. CITY-ST-ZIP PALM HARBOR FL 34885  DY STREET ADDRESS CITY-ST-ZIP  DT STREET ADDRESS CITY-ST-ZIP  DELETE  31 TITLE  32 NAME 33 STREET ADDRESS CITY-ST-ZIP  DELETE  41 TITLE  DELETE  42 NAME 42 NAME 42 NAME 43 STREET ADDRESS CITY-ST-ZIP  DELETE 51 TITLE  DELETE 51 TITLE  DELETE 51 TITLE  NAME SIREET ADDRESS CITY-ST-ZIP  DELETE 51 TITLE  DELETE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP  DELETE 51 TITLE  DELETE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP  DELETE 54 CITY-ST-ZIP  DELETE 55 TITLE  DELETE 56 STREET ADDRESS CHARAES STEWART  GS STREET ADDRESS CHARAES STEWART	CITY - ST - ZIP	TARPON SPRINGS FL 34689		1.4 CHTY - ST - ZIP		
STREET ADDRESS  CITY-ST-ZIP  DT  SMEAD, ELEANOR  SMEAD, ELEANOR  STREET ADDRESS  CITY-ST-ZIP  DUNEDIN FL 34698  CITY-ST-ZIP  DUNEDIN FL 34698  DELETE	TITLE		☐ DELETE	2 1 TITLE		Change Addition
DITY-ST-ZIP  TITLE  DT  SMEAD, ELEANOR  SMEAD, ELEANOR  SMEET ADDRESS  CITY-ST-ZIP  DUNEDIN FL 34698	NAME			2 2 NAME		
TITLE DT SMEAD, ELEANOR 32 NAME  SMEET ADDRESS DUNEDIN FL 34698  1515 BAYSHORE BLVD. #35 DUNEDIN FL 34698  10ELETE 31 TITLE 32 NAME  41 TITLE 42 NAME  42 NAME  43 STREET ADDRESS  CITY-ST-ZIP  TITLE 51 TITLE 51 TITLE 52 NAME  44 CITY-ST-ZIP  TITLE 52 NAME  52 NAME 53 STREET ADDRESS  54 CITY-ST-ZIP  DELETE 51 TITLE 52 NATH POPT RICHRY, FL 34655  TITLE 61 TITLE 62 NAME 63 STREET ADDRESS  54 CITY-ST-ZIP  DELETE 61 TITLE 63 NATH POPT RICHRY, FL 34655  CITY-ST-ZIP  NAME 63 STREET ADDRESS  CITY-ST-ZIP 63 NAME 63 STREET ADDRESS  CITY-ST-ZIP 65 NAME 63 STREET ADDRESS  CITY-ST-ZIP 74 NATH POPT RICHRY, FL 34655  CITY-ST-ZIP 75 NAME 63 STREET ADDRESS 75 NAME	STREET ADDRESS			2.3 STREET ADDRESS		
SMEAD, ELEANOR  STREET ADDRESS  CITY-ST-ZPP  DUNEDIN FL 34698  DUNEDIN FL 34698  DELETE  ACTIVE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  DELETE  ACTIVE  DELETE  DELETE  ACTIVE  DELETE  DEL	CITY-ST-ZIP		of the state of the control of the state of	2 4 CITY - ST - ZIP		
STREET ADDRESS DUNEDIN FL 34698  DUNEDIN FL 34698  DUNEDIN FL 34698  DELETE  DELETE  41 TITLE  AAME  42 NAME  43 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  41 TITLE  AS STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  51 TITLE  DELETE  52 NAME  53 STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  DELETE  DELETE  DELETE  61 TITLE  CHARPES STEWART  STREET ADDRESS  CHARPES STEWART  CHARPES	TITLE		DEFERE	31 TITLE		Change Addition
DUNEOIN FL 34698  34 CHY-ST-ZIP  DUNEOIN FL 34698  34 CHY-ST-ZIP  AME  42 NAME  42 NAME  43 STREET ADDRESS  CHY-ST-ZIP  DELETE  DELETE  DELETE  DELETE  DELETE  DT.  Change  Addition  Addition  Change  Addition  Change  Addition  Change  Addition  DELETE  S1 TITLE  DT.  Change  Addition  Change  Addition  DELETE  DT.  Change  Addition  Change  Addition  Change  Addition  Change  Addition  CHARTAS STEWART  CHARTA	NAME			3 2 NAME		
TITLE  NAME  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  DELETE  41 TITLE  42 NAME  43 STREET ADDRESS  44 CITY-ST-ZIP  DELETE  51 TITLE  DELETE  52 NAME  52 NAME  53 STREET ADDRESS  64 CITY-ST-ZIP  NAW PONT RICHAY, FL, 34655  TITLE  NAME  NAME  NAME  STREET ADDRESS  TOTALE  CHARAS STEWART  CHARAS STEWAR	STREET ADDRESS			33 STREET ADDRESS		
NAME SIREET ADDRESS CITY-ST-ZIP  ITTLE  DELETE  DELETE  DELETE  DELETE  A4 CITY-ST-ZIP  DOUBLETE  DOUBLETE		DUNEDIN FL 34698	Modrete			
STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  STITLE  STAME  BOIS HOMEN  STARET ADDRESS  STREET ADDRESS			DELETE			Change Addition
CITY-ST-ZIP  11/LE  11/LE  11/LE  15 1 TITLE  5 1 TITLE  5 2 NAME  5 2 NAME  5 3 STREET ADDRESS  CITY-ST-ZIP  11/LE  12 4 3 1 MARA UISTA DR.  5 4 CITY-ST-ZIP  11/LE  12 4 3 MARA UISTA DR.  5 4 CITY-ST-ZIP  13 4 C S  6 1 TITLE  14 C TY-ST-ZIP  15 C TY-ST-ZIP  16 2 NAME  17 4 C TY-ST-ZIP  18 1					1010	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TOTAGE  DELETE  DELETE  DELETE  S1TITLE  S2 NAME  S3 STREET ADDRESS  S4 CITY-S1-ZIP  DELETE  DELETE  DELETE  DELETE  S1 TITLE  DVP  CHARLES  CHARLES  THEET ADDRESS  CITY-S1-ZIP  CHARLES  CHARLES  CHARLES  COVE DR. KAUT  CITY-S1-ZIP  CADDRESS  G4 CITY-S1-ZIP  PAIM HARBOR, FL 34685						
NAME STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  DELETE  DELETE  DELETE  STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  BOIS HOMKN STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  BOIS HOMKN STREET ADDRESS STREET ADDRESS STEWART GS STREET ADDRESS GS ST	——— <del></del>		[ ]nc) etc			Change Maddition
CITY-ST-ZIP  TITLE  DELETE  S4 CITY-ST-ZIP  NAW PORT RICHRY, FL. 34655  61 TITLE  DVP  CHARAS STEWART  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  CHARAS STEWART  64 CITY-ST-ZIP  PAIM HARBOR, FL. 34685			Detric	57 HILE	A HOMEN	Change La Addition
CITY-ST-ZIP  TITLE  DELETE  S4 CITY-ST-ZIP  NAW PORT RICHRY, FL. 34655  61 TITLE  DVP  CHARAS STEWART  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  CHARAS STEWART  64 CITY-ST-ZIP  PAIM HARBOR, FL. 34685				LA CIOCCI ADODOGO	OUZI MANAJISTA	DR.
NAME STREET ADDRESS CITY-ST-ZIP  62 NAME CHARKS STEWART 63 STREET ADDRESS HOST EACHE COVE DR. EAST 64 CITY-ST-ZIP PAIM HARBOR, FL 34685				5.4 O(TV CT TIO	ALL DOOR DESTREE	FL BUILT
NAME STREET ADDRESS GENAME  62 NAME  CHARKS STEWART  GENAME  63 STREET ADDRESS HOST EACHE COVE DR. EAST  GENAME  64 CITY-ST-ZIP  PAIM HARBOR, FL 34685			□ DELETE	61 TITLE	JO FORT MICHRY,	Change Addition
STREET ADDRESS CITY-ST-ZIP  6.3 STREET ADDRESS HOST EACIR COVE DR. EAST 6.4 CITY-ST-ZIP  7.4 Lido hereby certify that the information supplied with this fitting is voluntarily furnished and rices not qualify for the exemption stated in Section 119 07/3/(b). Florida Statutes. Unother			Dotter	62 NAME	HARLAS STEWAR	T Change La resident
CITY-ST-ZIP PAIN HARBOR FL 34685  14. Lo 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)(b). Florida Statutes, I further	ŀ			es albert vuocac	1051 EAGLE COVE I	IR. EAST
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/iii Florida Statutes Hurther	i			6.5 STREET ADURESS	Alm HARRAD F	24600
		y certify that the information supplied w	ith this filing is voluntarily furnish	ed and does not qualify for	or the exemption stated in Section 119.0	7(3)(k), Florida Statutes. I further

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: HOMAN BOILS SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96 (813) 372-1798 Date Prone +