SEGOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

**NONPROFIT CORPORATION** ANNUAL REPORT



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

1996

N95000001918 (0)

DOCUMENT #

	LY CONNECTION CENTER,					
Principal Place of Business Mailing Address						am 44m 44m 44m 112m 12m 12m 1184 (4m 1981
2295 VICTORIA AVE. 2295 VICTORIA AVE. FORT MYERS FL 33901 FORT MYERS FL 33901						
					3. Date Incorporated or Qualified 04/21/1995	d 3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address			_		4. FEI Number	X Applied For
21 3406 Palm Beach Blvd. 26 3406 Palm			<u>Beach</u>	each Blvd. 65-0575098		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	8		City & State		6 Flactice Committee Committee	
′	Myers, FL 33916	28 Fort Myers	FL Coun	terr	6. Election Campaign Financing Trust Funo Contribution	Added to Fees
24 33916		29 33916	30	USA	8. This corporation has liability for Florida Statutes	or intangible tax under s. 199 032. Yes X No
-4 JJJ10	9. Name and Address of Curren		190	UDA	10. Name and Address of New F	Hard Brief Control of the Control of
			- 1	Name	To the state of Horizon	
VARLEY, E. GAIL				62 Street Address (P.O. Box Number is Not Acceptable)		
2295 VICTORIA AVE.				Street	Address (P.O. Box Number is Not Accepti	able)
FORT MYERS FL 33901				33		
			-	4 City		<b>85</b> Zip Code
			ľ	,		<b> -  </b>
office or reagent. Factorial agent. Factorial agent.	egistered agent, or both, in the State or familiar with, and accept the obligations. Signature, typed or printed name of registered ager.	of Florida Such change was au ilions of, Section 617.0503, Flor	uthorized t rida Statut	by the corporate	corporation submits this statement for the oration's board of directors. I hereby acce required when reinstating)	porpose of changing its registered pt the appointment as registered
12.	OFFICERS AND		13.	rgent arginaliste	· · · · · · · · · · · · · · · · · · ·	FICERS AND DIRECTORS IN 12
TITLE	D	DELETE		E	June Rose Change Addition 1563-2 Park Meadow Drive	
NAME			1.2 NAM	1E		
STREET ADDRESS			1.3 STA	EET ADDRESS	Fort Myers, Florida 33907	
CITY-ST-ZIP	FORT MYERS FL 33908		14011	- ST - ZIP	-	
TITLE	D	DELETE	2 1 Tife	E	D	Change 🔀 Addition
NAME	GINER, JIM		2 2 NAN	<b>IE</b>		295 Victoria Ave.
STREET ADDRESS	9066 FLAMINGO CIRCLE		2 3 STA	EET ADDRESS	c/o P.O. Box 6008	
CITY - ST - ZIP	FORT MYERS FL 33903	DELETE		Y - ST - ZIP	0,0 1101 2011 0000	Charles 9 6 Addition
TITLE	WATSON, GREG	DELETE	3 1 THTL			Unange Addition
NAME expect appared	3308 SW 7TH AVE.		3 2 NAN	-		
STREET ADDRESS	FORT MYERS FL 33903			EET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	3 4 CIT 4 1 TITL	Y - ST - ZIP F		Change Addition
NAME	FRIESEMAN, JAN		4 2 NAI			
STREET ADDRESS	9061 ASTER RD			FET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33912			-ST-ZIP		
TITLE	D	DELETE	5.1 TITL			Change Addition
NAME	NEOLEY, KATRINA	<del></del>	5 2 NAN			
STREET ADDRESS	2789 ORTIZ AVE			EET ADDRESS		
CITY - ST - ZIP	FORT MYERS FL 33905			-ST-ZIP		
TITLE	D	DELETE	6.1 TITU			Change Addition
NAME	GREGORY, JOY		6 2 NAN	(É		
STREET ADDRESS	2229 NE 5TH ST.		63STR	EET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33909		5.4 City	-ST-ZIP		
14. I do heret further ce	by certify that the information supplied rtify that the information indicated on	I with this filing is voluntarily fur this annual report or suppleme	nished an nta! annua	d does not I report is t	qualily for the exemption stated in Section rue and accurate and that my signature st	n 119.07(3)(k), Florida Statutes 1 nall 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

SIGNATURE: \_

