MP

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthage Secretary of State May 05 1998 8:00am

Secretary of State

DIVISION OF CORPORATIONS

POCUMENT #

N96000003477 (4)

COUNCIL ON AGING OF MARTIN COUNTY ALLIANCE, INC.

STUART PL 9996 STUA				: 		
STUART FL 34996 STUART	Principal Place	e of Business	Mailing Address			
# FER Number Applied For A						
## Principal Piace of Business 2a, Mailing Address 5. Certificate of Satus Desired \$8.75 Additional \$8.75 Additional	1					Applied For
### Principal Place of Business 2a. Mailing Address 2a. Suite, Apt. 8, etc. 5a. Centificate of Status Desired \$8.75 Additional Fee Regulard \$5.00 May de Address \$5.00 May de Address \$5.00 May de Address \$6.00 Ma					1	
Suite, Apt. #, etc. Trust fund contribution Added to Fees Activities a part the ourent year ingrigible personal Property Tax due June 30.	2. Principal P	lace of Business	2a. Mailing Address			
City & State	21		26		6. Certificate of Status Desired	
City & State City & State City & State Country State Co			Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
2D Country Zip Country Zip Country Zip Country B. This corporation owes or has paid the ourrent year intragalble Personal Property Tax due June 30.	22					
Solution	City & State		— ·			
MORALES, ESPERANZA 1071 EAST 10TH STREET 8TUART R, 34996 11. Pursuent to the provisions of Sections 617 0502 and 617 1508, Florids Statutes. The above-named corporation submits this statement for the purpose of changing lits registered agent. I am feature agent to minimum and accept the obligations of Sections 617 0502 and 617 1508, Florids Statutes. The above-named corporation submits this statement for the purpose of changing lits registered agent. I am feature with an accept the obligations of Sections 617 0503. Florids Statutes. 11. Pursuent to the provisions of Sections 617 0502 and 617 1508, Florids Statutes. The above-named corporation submits this statement for the purpose of changing lits registered agent. I am feature agent to minimum and provisions of Sections 617 0503. Florids Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 15. SIRECT ADDRESS 16. OLEAN BLD. #244 15. SIRECT ADDRESS 16. OLEAN BLD. #244 16. TITLE 17. Dures over + Dures & Change & Addition 17. ST-2P 18. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 19. Delete 2 in title 10. Delete 2 in title 10. Delete 3 in title 22. SIRECT ADDRESS 15. SIRECT ADDRESS 16. Cleaver 17. Dures over + Dures & Change & Addition 17. ST-2P 18. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12. 19. Delete 3 in title 22. SIRECT ADDRESS 10. ST-2P 10. Change Addition	Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
MORALES, ESPERANZA 1071 EAST 10TH STREET STUART R, 34998 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florids Blatutas, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 617 0503. Florids Statutes. SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. Make OFFICERS AND DIRECTORS 14. DELETE 1.1 THE OFFICERS AND DIRECTORS IN 12 TITLE OFFICERS AND DIRECTORS 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.3 SPECIADRESS OFFICERS AND DIRECTORS IN 12 SPECIAL HIGHWAY 5.5 Secretagray 5.5 Sec	24			30		
MORALES, ESPERANZA 1071 EAST 10TH STREET STUART FL 34998 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lits registered agent, and both, in the State of Ronday, Sociologic city 6003, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lits registered agent, and here with, and accept the appointment as registered segment, and accept the appointment as registered segment with, and accept the appointment as registered segment and accept the appointment as registered segment, and accept the accept the acc		9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
1071 EAST 10TH STREET STUART FL 34996 11. Pursuant to the provisions of Sections 617 DSQ2 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Ronday, Such charge wall as the provisions should directors. Thereby accept the appointment as registered office or registered agent, and accept the provisions of Sections 617 DSQ2. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent and the provisions of Sections 617 DSQ2. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered affects of the provisions board of directors. Thereby accept the appointment as registered spent agent and accept the appointment as registered agent				81 Name		
STUART FI, 34996 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 517.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered effect or registered agent, or both, in the State of Rorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503. Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D D DELETE 11. TILL D ROBERT LORRES GREGORY, KEANE STUART FI, 34994 12. NAME STREET ADDRESS 900 E. OCEAN BLD. #244 13. SIRECT ADDRESS 900 E. OCEAN BLD. #244 14. SIRECT ADDRESS 900 E. OCEAN BLD. #244 15. SIRECT ADDRESS 900 S.E. FEDERAL HIGHWAY 22. NAME VEBER, JEFFERY L 22. NAME 24. OITY-ST-ZIP TITLE D DELETE 31. TITLE D T T T T T T T T T T T T T T T T T T				82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
TILE OREGORY, KEANE STREET ADDRESS OTTY-ST-2P TITLE DELETE DELETE DELETE 2 SIRET ADDRESS OTTY-ST-2P STUART FL 34996 TITLE DELETE DELETE DELETE 1 STREET ADDRESS OTTY-ST-2P STUART FL 34996 DELETE DELETE DELETE DELETE DELETE 1 STREET ADDRESS OTTY-ST-2P STUART FL 34996 DELETE DELETE DELETE DELETE DELETE DELETE DELETE STUART FL 34996 Addition DELETE DELETE STUART FL 34996 DELETE STUAR						
TILE D DELETE 1.1 TILE D DELETE 1.1 TILE D DELETE 2.1 TILLE DEETE 2.1 TILLE D DELETE 2.1 TILLE D DELETE 3.1	STUART	FL 34996		63		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. The foliation of Section of 17 5093, Florida Statutos. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D OFFICERS AND DIRECTORS 12. NAME STREET ADDRESS GITY-ST-2P STUART FL 34994 14. CITY-ST-2P STUART FL 34994 14. CITY-ST-2P TITLE D DELETE 21 TITLE D DELETE 21 TITLE D DELETE 21 TITLE D DELETE 31 TITLE D DELETE 41 TITLE D DELETE 42 NAME STREET ADDRESS CITY-ST-2P STUART FL 34998 3. CITY-ST-2P STUART FL 34998 3. CITY-ST-2P TITLE NAME COLLIER, DAVID DELETE 51 TITLE NAME KAUFFMAN, BARBARA 1071 EAST 10TH STREET 52 NAME STREET ADDRESS CITY-ST-2P STUART FL 34998 53 STREET ADDRESS CITY-ST-2P STUART FL 34998 54 CITY-ST-2P TITLE NAME KAUFFMAN, BARBARA 52 NAME 53 STREET ADDRESS CITY-ST-2P STUART FL 34998 54 CITY-ST-2P TITLE NAME KAUFFMAN, BARBARA 52 NAME 53 STREET ADDRESS CITY-ST-2P STUART FL 34998 54 CITY-ST-2P STUART FL 34998 55 G. CLEAN BLU- Change Addition Change Change Addition Change				84 City	FL	85 Zip Code
SIGNATURE Symmetry Continue area of fry June aperl and till if applicable (NOTE: Registered Agent agradure required when rendating) CATE	11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Stati	utes, the above-named co	orporation submits this statement for the purpose of	f changing its registered
SIGNATURE Symmetry Continue area of fry June aperl and till if applicable (NOTE: Registered Agent agradure required when rendating) CATE) office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	a of Florida. Such change was ₃ations of, Section_617.0503. F	authorized by the corpor Florida Statules.	ration's board or directors. I hereby accept the app	pointment as registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D GREGORY, KEANE GREGORY, KEANE STREET ADDRESS 900 E. OCEAN BLD. #244 13. SIREET ADDRESS 15. ZP STUART FL 34994 14. CITY-ST-ZP TITLE D DELETE TITLE D DELETE D D DELETE D D D D D D D D D D D D D D D D D D	· ·	Esquinge	Moura		1/1	7 /98
TITLE NAME GREGORY, KEANE STREET ADDRESS STUART FL 34994 DELETE Addition MALE WEBER, JEFFERY L 2400 S.E. FEDERAL HIGHWAY STREET ADDRESS CITY-ST-ZIP STUART FL 34996 TITLE D DELETE 3 STREET ADDRESS CITY-ST-ZIP STUART FL 34996 TITLE D DELETE 3 STREET ADDRESS CITY-ST-ZIP STUART FL 34996 TITLE D DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS S. CLEAN BIVA S. CLEANE S. CLEANE C.						
MANE STREET ADDRESS CITY-ST-ZIP TITLE D DELETE CITY-ST-ZIP TO TRANSPORT STUART FL 34994 DELETE CITY-ST-ZIP TO TRANSPORT STUART FL 34998 COLLIER, DAVID TITLE M COLLIER, DAVID TO TRANSPORT STUART FL 34998 COLLIER, DAVID TO TRANSPORT STUART FL 34998 Addition Addition Addition Addition MANE COLLIER, DAVID TO TRANSPORT STUART FL 34998 Addition Addition Addition MANE COLLIER, DAVID TO TRANSPORT STUART FL 34998 Addition Addition MANE COLLIER, DAVID TO TRANSPORT ADDITION ADDITION ADDITION Change Addition Addition Addition Addition MANE STREET ADDRESS CITY-ST-ZIP TO THE M CAUFFMAN, BARBARA STREET ADDRESS TOTAL FL 34998 Addition Ad	<u> </u>					
STREET ADDRESS CITY-ST-ZIP STUART FL 34994 13 STREET ADDRESS CITY-ST-ZIP TITLE D DELETE Z1 TITLE D DELETE Z1 TITLE D DELETE Z1 TITLE D TREASURER + DIRECTOR STANT	[]	•	A DELETE			Cusula S vonition
STUART FL 34994 TITLE D DELETE Z1 TITLE CHAPTEST ADDRESS CHY-ST-ZIP STUART FL 34996 TITLE D DELETE Z1 TITLE Z2 NAME Z2 NAME Z3 STREET ADDRESS Z400 S.E. FEDERAL HIGHWAY Z3 STREET ADDRESS Z4 CHY-ST-ZIP TITLE D DELETE Z1 TITLE Z1	1			1		
TITLE NAME WEBER, JEFFERY L STREET ADDRESS CITY-ST-ZIP STUART FL 34998 DELETE 1 TITLE D DELETE 2 NAME 2 NAME 2 NAME 2 NAME SCHOONOVER, NICKI 3 NAME STREET ADDRESS 1071 EAST 10TH STREET TITLE D DELETE 1 TITLE D DELETE 3 STREET ADDRESS TOTY-ST-ZIP STUART FL 34998 1071 EAST 10TH STREET 1072 EACH CHARLES 1072 EACH CHARLES 1073 EACH CHARLES 1073 EACH CHARLES 1073 EACH CHARLES 1071 EAST 10TH STREET 1071 EAST 10TH STREET 1072 EACH CHARLES 1073 EACH CHARLES 1073 EACH CHARLES 1073 EACH CHARLES 1074 EACH CHARLES 1074 EACH CHARLES 1074 EACH CHARLES 1075 EACH CHARLES 1074 EACH CHARLES 1075 EACH CHARLES 1075 EACH CHARLES 1075 EACH CHARLES 1076 EACH CHARLES 1077 EACH CHARLES 1077 EACH CHARLES 1077 EACH	1				SI & SUNGU	
NAME WEBER, JEFFERY L 22 NAME 2400 S.E. FEDERAL HIGHWAY 23 STREET ADDRESS 24 CHY-ST-ZIP STUART FL 34998 24 CHY-ST-ZIP STUART FL 34998 24 CHY-ST-ZIP SCHOONOVER, NICKI 32 NAME 33 STREET ADDRESS 1071 EAST 10TH STREET 33 STREET ADDRESS 34 CHY-ST-ZIP STUART FL 34998 34 CHY-ST-ZIP Change Addition Additio			DELETE			i
STREET ADDRESS CITY-ST-ZIP STUART FL 34996 TITLE D DELETE SCHOONOVER, NICKI STREET ADDRESS CITY-ST-ZIP STUART FL 34996 TITLE D DELETE STUART FL 34996 TITLE D DELETE DELETE STUART FL 34996 TITLE D DELETE DELET	1				That the state of	Change Maddition
CITY-ST-ZIP STUART FL 34998 1071 EAST 10TH STREET TITLE P TITLE P CHange DELETE 3.1 TITLE 3.2 NAME 3.3 SIRECT ADDRESS CITY-ST-ZIP STUART FL 34998 3.4 CITY-ST-ZIP TITLE P DELETE 4.1 TITLE AGDRESS CITY-ST-ZIP TITLE M DELETE 4.1 STREET ADDRESS CITY-ST-ZIP TITLE M DELETE 4.1 STREET ADDRESS CITY-ST-ZIP TITLE M DELETE 5.1 TITLE M Change Addition NAME KAUFFMAN, BARBARA STREET ADDRESS CITY-ST-ZIP STUART FL 34998 TITLE M Change Addition Addition NAME KAUFFMAN, BARBARA STREET ADDRESS CITY-ST-ZIP STUART FL 34998 STREET ADDRESS CITY-ST-ZIP STUART FL 34998 STREET ADDRESS CITY-ST-ZIP STUART FL 34998 Change Addition Change Addition Change Addition Change Addition			ZZ DLLLIL		7D Treasurer + Director	Change Addition
TITLE D DELETE 3.1 TITLE D Change Addition NAME SCHOONOVER, NICKI 32 NAME STREET ADDRESS 1071 EAST 10TH STREET 3.3 STREET ADDRESS CITY-ST-ZIP STUART FL 34998 3.4 CITY-ST-ZIP TITLE P DELETE 4.1 TITLE D Change Addition NAME COLLIER, DAVID 4.2 NAME STREET ADDRESS 1071 EAST 10TH STREET 4.3 STREET ADDRESS CITY-ST-ZIP STUART FL 34998 4.4 CITY-ST-ZIP TITLE M DELETE 5.1 TITLE D Change Addition NAME KAUFFNAN, BARBARA 5.2 NAME STREET ADDRESS 1071 EAST 10TH STREET 5.3 STREET ADDRESS 5.3 CITY-ST-ZIP 5.3 Change Addition 5.3 Change DELETE 5.3 STREET ADDRESS 5.3 CITY-ST-ZIP 5.3 CHANGE			_	2.2 NAME	harles R. Cleaver	Change Addition
NAME SCHOONOVER, NICKI STREET ADDRESS CITY-ST-ZIP STUART FL 34996 1071 EAST 10TH STREET 33 STREET ADDRESS CITY-ST-ZIP DELETE 4.1 TITLE P	l ' I	2400 S.E. FEDERAL HIGHWA	_	2.2 NAME 2.3 STREET ADDRESS 1	harles R. Cleaver PO Box 9033 NA	Change Addition
STREET ADDRESS CITY-SI-ZIP TITLE P COLLIER, DAVID STREET ADDRESS CITY-SI-ZIP TITLE NAME COLLIER, DAVID STREET ADDRESS CITY-SI-ZIP TITLE M STUART FL 34996 TITLE M STUART FL 34996 TITLE M STREET ADDRESS STUART FL 34996 TITLE M STREET ADDRESS STUART FL 34996 TITLE STUART FL 34996 TITLE STREET ADDRESS CITY-SI-ZIP STUART FL 34996 TITLE STREET ADDRESS CITY-SI-ZIP STUART FL 34996 TITLE STREET ADDRESS CITY-SI-ZIP TITLE STUART FL 34996 TITLE STUART FL 34996 Addition	CITY-ST-ZIP	2400 S.E. FEDERAL HIGHW/ STUART FL 34998	AY	2.2 NAME 2.3 STREET ADDRESS 2. 4 CHTY-ST-ZIP	harles R. Cleaver PO Box 9033 NA	
STUART FL 34996 3.4. CITY-ST-ZIP	CITY-ST-ZIP TITLE	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D	AY	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	harles R. Cleaver PO Box 9033 NA	
TITLE	CITY-ST-ZIP TITLE NAME	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D SCHOONOVER, NICKI	AY	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	harles R. Cleaver PO Box 9033 NA	
NAME	CITY-ST-ZIP TITLE NAME STREET ADDRESS	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D SCHOONOVER, NICKI 1071 EAST 10TH STREET	AY	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	harles R. Cleaver PO Box 9033 NA	
1071 EAST 10TH STREET	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34996	AY DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	harles R. Cleaver PO Box 9033 NA	☐ Change ☐ Addition
STUART FL 34996	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34996 P	AY DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-Zip 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4. City-St-Zip 4.1 Title	harles R. Cleaver PO Box 9033 NA	☐ Change ☐ Addition
TITLE	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34996 P COLLIER, DAVID	AY DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	harles R. Cleaver PO Box 9033 NA	☐ Change ☐ Addition
NAME	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	2400 S.E. FEDERAL HIGHW/ STUART FL 34996 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34996 P COLLIER, DAVID 1071 EAST 10TH STREET	AY DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	harles R. Cleaver PO Box 9033 NA	☐ Change ☐ Addition
STREET ADDRESS 1071 EAST 10TH STREET 5.3 STREET ADDRESS	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	2400 S.E. FEDERAL HIGHWASTUART FL 34998 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34996 P COLLIER, DAVID 1071 EAST 10TH STREET STUART FL 34996	DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	harles R. Cleaver PO Box 9033 NA	Change Addition Change Addition
CRY-ST-ZIP \$TUART FL 34996 5.4 CRY-ST-ZIP TRLE	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	2400 S.E. FEDERAL HIGHWASTUART FL 34998 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34996 P COLLIER, DAVID 1071 EAST 10TH STREET STUART FL 34996 M	DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	harles R. Cleaver PO Box 9033 NA	Change Addition Change Addition
TITLE DELETE 6.1 TITLE Change Addition	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME NAME	2400 S.E. FEDERAL HIGHWASTUART FL 34998 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34998 P COLLIER, DAVID 1071 EAST 10TH STREET STUART FL 34996 M KAUFFMAN, BARBARA	DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	harles R. Cleaver PO Box 9033 NA	Change Addition Change Addition
NAME 62 NAME	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	2400 S.E. FEDERAL HIGHW/ STUART FL 34998 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34998 P COLLIER, DAVID 1071 EAST 10TH STREET STUART FL 34996 M KAUFFMAN, BARBARA 1071 EAST 10TH STREET	DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	harles R. Cleaver PO Box 9033 NA	Change Addition Change Addition
	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	2400 S.E. FEDERAL HIGHW/ STUART FL 34998 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34998 P COLLIER, DAVID 1071 EAST 10TH STREET STUART FL 34996 M KAUFFMAN, BARBARA 1071 EAST 10TH STREET	DELETE DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	harles R. Cleaver PO Box 9033 NA	Change Addition Change Addition Change Addition
STREET ADDRESS 6.3 STREET ADDRESS	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	2400 S.E. FEDERAL HIGHW/ STUART FL 34998 D SCHOONOVER, NICKI 1071 EAST 10TH STREET STUART FL 34998 P COLLIER, DAVID 1071 EAST 10TH STREET STUART FL 34996 M KAUFFMAN, BARBARA 1071 EAST 10TH STREET	DELETE DELETE	2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	harles R. Cleaver PO Box 9033 NA	Change Addition Change Addition Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 12 or Block 13 if changed, or on an attachment with an address.

BIGNATURE: CROLLER CO