FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600004460 (9)

		MAN SERVICES							
Principal Place	e of Business		Mailing Address					f ingiliar and riftle mitt maint built dubit maint maint milit ditti man ibil.	
1801 W GULF ATLANTIC HWY WILDWOOD FL 34785-8158 1801 W GULF ATLANTIC HWY WILDWOOD FL 34785-8158 1801 W GULF ATLANTIC HWY WILDWOOD FL 34785-8158								3. Date incorporated or Qualified 08/23/1996 4. FEI Number Applied For	
2. Principal P	lace of Busines	2a. Ma	2a. Mailing Address				59-3399024 Not Applicable		
21	.400 01 20000.	-	26					5. Certificate of Status Desired 58.75 Additional Fee Required	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be	
City & State			27	City & State				Trust Fund Contribution Added to Fees	
23			28					7. Is this nonprofit corporation a homeowners association?	
Zip	Zip Country			Zip Cou				8. This corporation owes or has paid the current year Intangible	
24				30			Personal Property Tax due June 30. Yes No		
	9. Name an	d Address of Curr	ent Registere	d Agent		81	Name	10. Name and Address of New Registered Agent	
001107					Į				
COURTER, PHILIP R 121 NW CRYSTAL ST.						82	Street A	et Address (P.O. Box Number is Not Acceptable)	
CRYSTAL RIVER FL 34428					r	83		· · · · · · · · · · · · · · · · · · ·	
on one man re over					ŀ	84	City	85 Zip Code	
						_		FL `	
) agent.1a	to the provision: egistered agent m familiar with,	s of Sections 617.0: t, or both, in the Sta and accept the obl	te of Florida. Sigations of, Se	Such change was ection 617.0503, Fl	ies, the an authorized orida Stati	ove I by Ites	the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or p	orinted name of registered a			E Registered	Age	nt signature re	required when reinstating) DATE	
12.		OFFICERS A	ND DIRECTO		13.		r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD CLARK U	FORFOT A		DELETE	1.1 TiT		h	Dry walter	
name Street adoress					1.2 NAME 1.3 STREET ADDRES			Dry, walter Oaks Circle	
	OCALA FL 34481				1.4 00		AUDHESS C. 710	Spring Hill FL 34606 Throngs Addition	
TITLE	TD			DELETE	2.1 Ty	_	1-21	Change Addition	
NAME	COURTER	, PHILIP		23/N			K	Gamstas, Earl 6726 Grover Cleveland Blud,	
STREET ADDRESS		RYSTAL ST.			2.3 ST	REET.	ADD SS	6726 Grover Cleveland 51001	
CITY-ST-ZIP		RIVER FL 34428			/ -	_	7. ZIP	Home sassa springs PL 34446	
TITLE	SD SDV MALESCO			☐ DELETE			l	☐ Change ☐ Addition	
NAME	DRY, WALTER 3418 KNOTTY OAKS CIRCLE		_	, ,		3.2 NAME 3.3 STREET ADDRESS		Same	
STREET ADDRESS CITY-ST-ZIP		ILL FL 34808	.t	,	3.3 STI			<i></i>	
TITLE	VD/S		<u>a</u>	DELETE /	4.1 Til			S'D Change Le Addition	
NAME	ATZNUAS	G. EARL (S	シ		4. 2 NJ			Leonard Barriner Change Paddition Leonard Barriner 2048 N.E. 4551,	
STREET ADDRESS	ss 6726 GROVER CLEVELAND		BLVD.			4.3 STREET ADDRESS		2048 N.E. 45 50	
CITY-ST-ZIP	HOMASAS	SSA SPRINGS FL	34446				I - ZIP	Ocala, PC 34117	
TITLE				☐ DELETE	5.1 TIT]	☐ Change ☐ Addition	
NAME					5.2 NA		-		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP							T-ZIP		

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Ma Charman Philip R. Courter, treas. 7-18-98

FILED Feb 24 1998 8:00am Secretary of State

CR2E037 (10/97)