AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N97000011 15 (1)

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SECRETARY OF STATE

CAHEER	11515.URU	a INC	)•							3ECN:			
Principal Plac	ce of Busines	ss		Mai	iling Address	s					I BOMA DENN EBAM BI		
3 SANTA LUCIA AVE ORMOND BEACH FL 32174					3 SANTA LUCIA AVE ORMOND BEACH FL 32174					3. Date incorporated or Qualified 02/24/1997 4. FEI Number Applied For			
										59-353783	37		lot Applicable
Principal Place of Business     21				2a. 26	2a. Mailing Address 26					5. Certificate of Status Desire	ed 🔲	-	Additional lequired
Suite, Apt.	. #, etc.			<u> </u>	Suite, Apt. #	, etc.				6. Election Campaign Financi	ing	\$5.00	May Be
City & State			27						Trust Fund Contribution		Added t		
City & State 23			28	City & State					7. Is this nonprofit corporation	a homeowner	s associatio No	n?	
Zip		C	ountry		Zip	1	Count	try		8. This corporation owes or ha			tangible
24		25	•	29	,	Ī	30	-		Personal Property Tax due		Yes [	] No
	9. Name	and A	ddress of Curr	ent Registe	ered Agent					10. Name and Address of Ne	w Registered	Agent	
							8	31 N	ame				
POWERS, JIM								12 St	reet Addre	Address (P.O. Box Number is Not Acceptable)			
	LUCIA AVE							13					
ORMUND	BEACH FL	32174	t				Ľ	2					
							8	4 Ci	ty		FL	85 Zip	Code
							- 1		d comoral	tion submits this statement for the		naina its rec	istored
11. Pursuant t	to the provision	ons of s	ections 617.050	2 and 617,1	1508, Florida	Statutes, t	the above	-name	u conuciai				
11. Pursuant t office or re	to the provision of the provision of the provision of the province of the prov	ons of a	sections 617.050 both, in the State	2 and 617.1 of Florida.	1508, Florida Such chang	Statutes, t ge was auth 1503 Florid	the above horized by ta Statute	-name / the c	orporation	s board of directors. I hereby acc	ept the appoint	ntent as reg	istered
	NA /Z			2 and 617.1 of Florida, pations of, sp	1508, Florida Such chang petion 617.0	Statutes, to ge was auti 9503, Florid	the above horized by la Statute:	-name / the c s.	orporation	tion submits this statement for the e's board of directors. I hereby acc	ept the appoint $9/28$	ment as reg	istered
11. Pursuant to office or reagent, I as SIGNATURE.	NO CH	and		en f	our					s's board of directors; I hereby accurrently when reinstating)	ept the appoint	ntent as reg	istered
SIGNATURE.	NO Ch Signature, typed	or printed	2e) 5~	ont and title if a	pplicable.		E: Registered	Agent s	gnature requi	ired when reinstaling) ADDITIONS/CHANGES TO	DATE	791	
SIGNATURE.	NO CH	or printed	i name of registered ag	ont and title if a	pplicable.		13.	Agent s	gnature requi	ired when reinstaling)  ADDITIONS/CHANGES TO	DATE	791	
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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 constraint 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 pranged, or on an attackment with an address.

SIGNATURE: