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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

| DCU   | MENT # <b>P03</b> 3  | 332 (4  | 4)   |  |  |  |  |                                      |
|---|--|---|--|--|--|--|--|--------------------------------------|
| orporation  |  | •   | '/   |  |  |  |  |                                      |
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| ipal Place  | of Business  | Mailing Address   |  |  | 1,000,000 60,000 40,000 40,000   |  | CHE OHH OLDH DE  | HI HARK ANAK AN                      |
| 441<br>O BOX 10   |  | RT 441<br>P O BOX 1030  |  |  |  |  |  |                                      |
| achua fi  |  | ALACHUA FL 32   | 2615   |  | 3. Date Incorporated or Qualific 09/11/1984  | ed <b>3a</b> .   | Date of Last 6<br>02/06/19   | •                                    |
| nnoipal Pla   | ace of Business  | 2a. Mailing Addres  | s  |  | 4. FEI Number  |  |  | Applied For                          |
| иte, Apt. #   | #, etc.  | Suite, Apt. #, e  | rtc.   |  | 22-1987926   |  | \$8.7  | Not Applicat  5 Additional           |
|   |  | 27  |  |  | 5. Certificate of Status Desired   |  | •  | Required                             |
| ly & State  |  | City & State  |  |  | 6. Election Campaign Financino   | 9 🗅  |  | 00 May Be                            |
| p   | Country  | 28 Zip  | Cou  | intry  | Trust Fund Contribution  8. This corporation has liability   |  |  | to Fees                              |
|   | 25   | 29  | 30   |  |  | Yes N  |  | 199.032,                             |
|   | 9. Name and Address of Cur   | rrent Registered Agent  |  |  | 10. Name and Address of Ne   | w Registe  | red Agent  |                                      |
| DANICI  | METT   |   |  | 81 Narne   |  |  |  |                                      |
| DANIEL<br>ROUTE   |  |   |  | 82 Street Ac   | ddress (P.O. Box Number is Not Accep   | otable)  |  |                                      |
| P.O. BO   |  |   |  | 83   |  |  |  |                                      |
|   | JA FL 32615  |   |  |  | · · · · · · · · · · · · · · · · · · ·  |  |  |                                      |
| ALAOI IOA I E 020 (3  |  |   |  | 84 City  |  |  | <b>=L</b>  85  Z   | ip Code                              |
| ir registere<br>amiliar with  | h, and accept the obligations of, S  | Horida: Such change was au<br>Section 607.0505, Florida Sta   | thorized by the c<br>atutes.   | corporation's bo   | poration submits this statement for the loard of directors. I hereby accept the a  | purpose of<br>appointmen   | changing Its<br>t as registered  | registered of<br>d agent. I am       |
| ir registere<br>amiliar with  | ed agent, or born, in the State of F<br>fn, and accept the obligations of, S<br>Signature, typed or printed name of registered a<br>OFFICERS   | iorida: Such change was au<br>Section 607.0505, Florida Sta<br>Section and title of applicable.<br>AND DIRECTORS  | thorized by the catutes.  (NOTE: Registered  | Corporation's by   | poration submits this statement for the coard of directors. I hereby accept the a<br>ured when renstating)  ADDITIONS/CHANGES TO C | purpose of<br>appointmen   | changing its<br>t as registered  | d agent. I am                        |
| ir registere<br>amiliar with  | ed agreet, for both, in the state of Fin, and accept the obligations of, Signature, typed or pretion name of registered a OFFICERS   | Torida, Such change was au Section 607.0505, Florida Sta  | (NOTE: Registered  | Agent signature requ   | oard of directors. I hereby accept the a   | purpose of<br>appointmen   | changing its<br>t as registered  | d agent. I am                        |
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| ADDRESS   | Signature, typed to predict name of registered is  OFFICERS  D  SPIRES, CHARLES  HWY 441   | iorida: Such change was au<br>Section 607.0505, Florida Sta<br>Section and title of applicable.<br>AND DIRECTORS  | (NOTE: Rogistered 13. 1.111 1.2 NA 1.3 ST  | Agent signature requirements  TLF  LME  REET ADDRESS   | oard of directors. I hereby accept the a   | purpose of<br>appointmen   | f changing its<br>of as registered<br>to<br>AND DIRECTO  | d agent. I am                        |
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| amihar with   | OFFICERS  D SPIRES, CHARLES HWY 441 ALACHUA FL UPST JETT, DANIEL N. HWY 441 ALACHUA FL CD CD   | Iorida   Such change was au<br>Section 607.0505, Florida Sta<br>  Section 607.0506<br>  AND DIRECTORS   DELETE  | (NOTE: Registered 13. 1.11) 1.2 NA 1.3 ST 1.4 CI 2.2 NA 2.3 ST 2.4 CI 3.3 TT 1.3 ST 2.4 CI 3.3 ST 1.3 ST 3.4 CI 3.3 ST 3.3 ST 3.4 CI 3.2 ST 3. | Agent signature required to the signature re | oard of directors. Thereby accept the a  urest when revisiting)  ADDITIONS/CHANGES TO C  | purpose of appointment   | t changing its It to the control of  | DRS IN 12 Addition Addition          |
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SIGNATURE:

NG OFFICER OR DIRECTOR