## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97; \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	NAME TO STATE OF THE PROPERTY	9 (2)		A ARRESON FAIR ANN AIRM ARAN ARAN ARAN	YA BIRDI BIRDI BIRDI BIRDI BIRDI BIRDI IRBI
2		17-91 4 1 1	····		
Principal Place of Business Mailing Address					
		P.O. BOX 985006 FT. WORTH TX 76185			
i ti. Woniii ii	, 10101	TI WORLL IN 10100		DO NOT WRITE	E IN THIS SPACE
				3. Date Incorporated or Qualified	3a. Date of Last Report
				03/02/1989	08/19/1996
	lace of Business	2a. Mailing Address		4. FEI Number 75-1246210	Applied For
		26			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	
24	25		30	Personal Property Tax due June	
	9. Name and Address of Curren			10. Name and Address of New Re	
ATTN: MURRY A. BULLION 81 Name					
1 a aga garaga nun a				ray A. Bullion  Iress (P.O. Box Number is Not Accepted	blo
STE. 29 LOI Sou:				Southhall Lane. 5k	ะ์"โธง
9- FT. HYERG FL 33901 - Q. 83					
-			84 City no		85 Zip Code
			"   " M	aitland	FL   32761
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute:	s, the above-named cor	poration submits this statement for the pation's board of directors. I hereby acce	purpose of changing its registered
agent la	m familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statutes.	gion's board of directors. Thereby acce	prine appoinment as registered
SIGNATURE					
		Registered Agent signature requ	uired when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE	
12.	PD OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
NAME	ALLEN, JERRY W.	_ otten	1.2 NAME		E oldigo E station
STREET ADORESS	3880 HULEN		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WORTH TX		1.4 CITY-S1-ZIP		
TITLE	VP	DELETE	21 TITLE		☐ Change ☐ Addition
NAME	STONE, THOMAS J		2.2 NAME		
STREET ADDRESS	3880 HULEN ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WORTH TX 73107		2. 4 CITY - \$1 - ZIP		
TITLE	VD	DELETE	3.1 TITLE		Change Addition
NAME	AUGHINBAUGH, JOHN R		3.2 NAME		
STREET ADORESS	3880 HULEN		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WORTH TX		3.4. CITY - ST - ZIP		
TITLE	CD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HAMMOND, WILTON N.		4. 2 NAME		
STREET ADDRESS	3880 HULEN		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WORTH TX	DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE	REYNOLDS, ROBERT, M	☐ Detet	51 TITLE		FT CHANGE FT WOOLIDY
NAME CTREET ADDRESS	3880 HULEN		5.2 NAME		
STREET ADDRESS	FT WORTH TX		5.3 STREET ADDRESS		
CITY-ST-ZIP	V\$	☐ DELETE	5.4 CRY - ST - ZIP 6.1 TITLE		Change Addition
NAME	KARR, RUSSELL A		6.2 NAME		
STREET ADDRESS	3880 HULEN		6.3 STREET ADDRESS		

14. I do 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 receivor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

8/19/94 (814)735-6049

**FILED** 

Sep 02 1997 8:00am

Secretary of State