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•	PROFIT
' '	CORPORATION
	ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

BEVERL	Name LY SAVANA CAY MANOR, IN	IC.			 	ON HARI BIRIN GIRIN DIRIN RIBIN RIBIN RABIN
						
rincipal Place of Business		Making Address	•			
5111 ROGERS	AVENUE	5111 ROGERS AVENUE SUITE 40-A				
Suite 40-A Fort Smith	AR 72919-0155	FORT SMITH AR 72919	10155		3. Date Incorporated or Qualified	3a. Date of Last Report
JS		U\$			05/17/1989	05/01/1995
Principal Plac	ce of Business	2a. Mailing Address			4, FEI Number	Applied Fo
		26 Suite Apt tooks			95-4217381	Not Applic \$8.75 Addition
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required
City & State		Orty & State			6. Election Campaign Financing	5.00 May B
·		28			Trust Fund Contribution	Added to Fees
Zip	Country	Žφ	Country		This corporation has liability for Florida Statutes Yes	rintangible tax under s. 199.032. s. □ No
	25 Name and Address of Current F	29 Registered Agent	30		10. Name and Address of New I	
	A' Hame and workers of collent t	rofigure vilain	81	Name		<u>,,,==</u>
C T CO	RPORATION SYSTEM		82	Ctropt A	Address (P.O. Box Number is Not Accepta	ble)
	PINE ISLAND RD.		62	Str ee t A	8000018	33258
	110N FL 33324		83		-05/21/9601	162010
			84	City	*** 200.00	85 Zip Code
		·····			rporation submits this statement for the pu	<u> </u>
NATURE		1 607.0505, Florida Statutes.			poration stibilities this statement for the pic board of directors. Thereby accept the app	
NATURE _	Signature, typed or printed name of registured agent and OFFICERS AND I	d the francicable (NC) DIRECTORS	Tk. Registered Ager I		egargol when rumstal haji	ानाः FICERS AND DIRECTORS IN 17
ENATURE _	Signature, typed or printed name of registered agent and OFFICERS AND 1	d title if applicable (NO	TE Registered Agent 13. 1 1 TiTLE		egargol when rumstal haji	CIÁTE
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SIGNATURE:

John W. MacKenzie 4/25/96

501-484-8465