FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000003743 (0)

Country

25

BURDETTE & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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13927 DOUBLETREE TRAIL WEST PALM BEACH FL 33414

2. Principal Place of Business

Suite, Apt #, etc.

City & State

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13927 DOUBLETREE TRAIL WEST PALM BEACH FL 33414-4082 FILED Apr 24 1997 8:00am Secretary of State



Yes No

This corporation has liability for intangible tax under s. 199.032,

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

05/01/1996

3. Date Incorporated or Qualified

01/15/1993

65-0380471

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

4. FEI Number

g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
SUSAN C BURDETTE				81	Name				
13927 DOUBLETREE TRAIL -9TH FLOOR BARNETT CENTRE-				82	Stront A	Address (P.O. Box Number is Not Acceptable)			
				4+ Glodi Addides (F.O. DOX Iddilinal is Iddi Addaptana)					
WEST PALM BEACH FL 33414				83					
			-	_			·		
				84	City	FL	85 Zip (Code	
11 Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered									
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE Signature: typod or profest name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) DATE									
12.	OFFICERS AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12	
TITLE	V	☐ DELETE	1.1 TITLE		1		Change	Addition	
NAME	BURDETTE, G. M		1.2 NAME]			j	
STREET ADDRESS	13927 DOUBLETREE TRAIL		1.3 STR	REET A	address				
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CI3	y · st	r-ZIP				
tillE .	DPST DELETE		2.1 TITI	LE	1		☐ Change	☐ Addition	
NAMi	BURDETTE, SUSAN			ME	ļ				
STREET ADDRESS	13927 DOUBLETREE TRAIL			REET /	address				
City-St-ZiP	WEST PALM BEACH FL		2.4 CITY-ST-ZIP		T-ZIP				
THTLF	V DELETE		31 TITLE				Change	Addition	
NAME }	Provini Ferdinand	j	3.2 NAI	ME	j			J	
STREET ADDRESS	1933 STRATFORD WAY]	3.3 STF	REET /	address				
CITY-ST ZIP	WEST PALM BEACH FL		3.4. Cit	TY-51	T-ZIP				
TITLE		DELETE	4.1 TiT	LE			Change	☐ Addition	
NAME :			4.2 NA	AME	}			ļ	
STREET ADDRESS			4.3 STF	reet <i>i</i>	adoress				
CHY-S1-ZIP			4.4 CIT	TY-\$1	r-ZiP				
THLE		DELETE	5.1 111	LE			Change	Addition	
, NAME			5.2 NA	ME)	
STREET ADDRESS			5.3 STF	REET /	adoress				
CHY-S1-ZIP			5.4 CIT	Y-ST	r-ZIP				
1111.6		☐ DELETE	6.1 TIT	LE			Change	☐ Addition	
NAME	!		6.2 NAME		Í			ļ	
STHEEL ADDRESS			63,511	REET	address			,	
CITY - ST - ZIP			6.4 CIT						
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 receiver 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.									

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Country

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