SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

FT WALTON BEACH FL 32541

DOCUMENT # P93000009475 (3)

WW PERFORMANCE, INC.

Principal Place of Business Mailing Address BUS 300 RACETRACK RD NE 2012 WALTON WAY

DESTIN FL 32541



					3. Date incorporated or Qualified 02/01/1993	d 3a. Date of Last Report 09/25/1995								
9 Principal Pla	ace of Business	2a. Mailing Address	Mailton Address		4. FEI Number	Applied For								
21	age of Edainioss	26	¬		59-3161460	Not Applicable								
Suite, Apt #	f, etc	Suite, Apt #, etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required								
City & State		City & State		,,	Election Campaign Financing Trust Fund Contribution Trust Fund Contribution St.00 May Be Added to Fees									
Z _{ID}	Country	Zip	Country			or intangible tax under s. 199.032.								
24	25		30			Yes No								
	9. Name and Address of Currer		L1		10. Name and Address of New I	Registered Agent								
STEPHENS, GLENN E 2012 WALTON WAY DESTIN FL 32541				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)										
								UC	31114 I L 3234 I		83			
											84	City		FL 85 Zip Code
agent Lar	og stered agent, or both, in the State in familiar with, and accept the oblig signature typed or protections of registered age.	estand the Capplicable (NOT)	rida Statutes. E. Registered Ager	nt signature required	d wher renstatings	DATE FICERS AND DIRECTORS IN 12								
12.	OFFICERS AN	ND DIRECTORS DELETE	13.	P		Change Addition								
TITLE	CTECHTAIC OLEMA E	Derese	1.1 TIRE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Change								
NAME	STEPHENS, GLENN E		1 2 NAME	37	ephins, blenn L									
STREET ADDRESS	2012 WALTON WAY DESTIN FL		1.3 STREET	ADDRESS 80	WATTON WAY	ru i								
CHTY-S1-ZIP	V V	DELETE	1.4 C(TY - S)	1 - ZIP - OE	13/14 Pl. 32	Change Addition								
TITLE	STEPHENS, PHILLIS C		2.1 HILE 2.2 NAME	54	when Phillis 1	onange								
NAME	2012 WALTON WAY		2.3 STREET		ephins, 6lenn E Walton Way estin Fl. 32 ephins, Phillis C Walton Way estin, Fl. 32									
STREET ADDRESS	DESTIN FL		2 4 O TY - S	7.70	estin Fl. 32	541								
CITY-ST-ZIP TITLE	DESIM FL	DELETE	31 TITLE	.1 - ZSF	37.11 ,7 ,7	Change Addition								
NAME			3 2 NAME											
STREET ADDRESS			3 3 STREET	ADDRESS										
CITY-ST-ZIP			34 CITY-S	·										
TITLE		DELETE	41 TIFLE	1-20		Change Addition								
NAME			4 2 NAME											
STREET ADDRESS			4 3 STREET	ADDRESS										
City-St-2iP			4.4 C/TY - S	T - ZIP										
TITLE		DELETE	5 1 TIFLE			Change Addition								
NAME.			5.2 NAME											
STREET ADDRESS			5.3 STREET	ADDRESS										
CITY-ST-ZIP			5 4 CITY - S	1 - 709										
TITLE		DELETE	6.1 TITLE			Change Addition								
NAME			€ 2 NAME											
STREET ADDRESS			63STRFF1	ADDRESS										
CITY - ST - ZIP			6 4 CITY - S	iT - ZIP										
		1 20 10 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1				at 110 07/03/L) Find de Culture I								

I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Som E The Glinn E Stephens Presolut 7-1-86 (504)862-1024
AGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR