## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

P93000011275 (3)

**DOCUMENT #** 

VIRTU	OSITY, II	NC.											
Principa! Place	of Business			Mai	iling Address					1		UU ITAIU III	BIT (BBB) B(I) 1811
1702 BLUE HERON LANE FERNANDINA BEACH FL 32034				P.O. BOX 6342 FERNANDINA BEACH FL 32305 US						···			
										3. Date Incorporated or Qualified 02/08/1993		of Last F 5/01/19	
2. Principal Place of Business					2a. Mailing Address					4. FEI Number	<u> </u>	<u> </u>	Applied For
21				[26]						59-3167363			Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #. etc.					5. Certificate of Status Desired	П		5 Additional	
22 Ch. 9 State				[27]						<u></u>		Required	
City & State				City & State					6. Election Campaign Financing Trust Fund Contribution			00 May Be	
Zip Country							untry			This corporation has liability for			ed to Fees
24	25			29	···•1				Florida Statutes			x under s	199.032,
9. Name and Address of Current							Γ	10. Name and Address of New Registered Agent					
							81	Name					** **
MILLER, LYLE T								Street A	Addres	s (P.O. Box Number is Not Acceptate	<del></del>	-··-	
1702 BLUE HERON LANE								Oli Odi 7					
Fernan	ndina bea	CH FL 320	34				83						
							84	City				<b>85</b> Z	ip Code
							<u> </u>				FL		.
or registere	ed agent, or	both, in the S	itate of Florida	Such	change was authorize	ad by the	ove-r corp	named coi oration's l	rporati board	ion submits this statement for the pur of directors. I hereby accept the app	pose of cha pintment as	inging its reaistere	registered office
familiar wit	h, and accep	ot the obligati	ons of, Section	607.0	505, Florida Statutes.		,			,			
SIGNATURE .	Standing bond	or odeli i Conse of	registered agont an	s Idio B se	astinable (NA)	TG: Dispersion	d Amin	t cionatura en		then reinstating)	DATE		
12.	O'91 (011 0, 17) A (1		FICERS AND I			13.	1 Figor	. signature re	edo uesa w	ADDITIONS/CHANGES TO OFF	· · · · · · · · · · · · · · · · · · ·	DIBECTO	OBS IN 12
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NAME	MILLER	LYLE T				1.2 N	IAME						
STREET ADDRESS	STREET ADDRESS 1702 BLUE HERON LANE				1.3\$			ADDRESS					li
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STREET ADDRESS	-594 FAITH AVE					23 ST			15	O4 BROOME ST. RNANDINA BEACH			<b>~</b> 4
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NAME						62 N	AME						
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I do hereby certify that the Information suprified with this filing 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 it is 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 collection of the receiver or tripstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13/k oranged or on an attrict mental production.

SIGNATURE:

THE MILL LUTTHER M. MILLER 5/1/96 (904)277-4698