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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Apr 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000013604 (2)

OPERATORS STANDING BY, INC.

Principal Place of Business Mailing Address P. O. BOX 49828 1055 SOUTH TAMIAMI TRAIL **SARASOTA FL 34230-6828** SUITE 204 SARASOTA FL 34237 3. Date Incorporated or Qualified 3a. Date of Last Report 02/15/1993 03/25/1996 4. FEI Number 2. Principal Place of Business Mailing Address Applied For 65-0394635 Not Applicable 21 2197 RINGLING 26 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 **Trust Fund Contribution** Added to Fees SARASOTA 6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Ves No Zip Country 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LEWIS, JERRY D LEWIS, JERRY 1055 SOUTH TAMIAMI TRAIL Street Address (P.O. Box Number is Not Acceptable) 2/97 RINGLING BLV SUITE 204 83 SARASOTA FL 34236 RΔ SARASOTA 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 registored 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. LETARY. SIGNATUR OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Change Addition ħ DELETE TITLE 1.1 TITLE DIRECTOR LEWIS, JERRY D. Lewis, Jerry D NAME 1.2 NAME 2197 PINGLING BLVD 1055 S. TAMIAMI TRAIL, #204 1.3 STREET ADDRESS STREET ADDRESS SANASOTA, FL 34237 Change SARASOTA FL 1.4 CITY - ST - ZIP CITY: ST-ZIE DELETE Addition 2.1 TiTL€ MILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 31 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TOLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-S1-ZIP Addition DELETE 5.1 TITLE Change THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHY-ST-7P DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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.

TEMPY D. LEWIS 1/6/97 (94) 906-9000