## 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 # P93000019318 (3)

PROFUND OF FLORIDA, INC.

<b></b>		
Principal Place of	Business	Mail

Mailing Address

## FILED May 21 1997 8:00am Secretary of State



6243 FORESTWOOD EAST DRIVE LAKELAND FL 33811		6243 FORESTWOOD EAST LAKELAND FL 33811	6243 FORESTWOOD EAST DRIVE LAKELAND FL 33811									
						3. Date incorporated or Qualified 3a. Date of Last Re 03/10/1993 05/01/1996			Report			
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			1	4. FEI Number			Applied For		
21	П с в с	26	<del> </del>				59-3172468			lot Applicable		
Suite Apt. #, etc. 22		Suite, Apt. #, etc.	27			(	5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State	9	City & State					6. Election Campaign Financing Trust Fund Contribution			May Be to Fees		
2(p)	Country 25	Zip 29	Country 30				This corporation has liability for intangible tax under s. 199.032,     Florida Statutes					
9. Name and Address of Current Registered Agent						10	0. Name and Address of New Re					
MCG	RAFFIGAN, ANDREW J			81	Name							
6243 FORESTWOOD EAST DRIVE LAKELAND FL 33811				82	Street	Address	dress (P.O. Box Number is Not Acceptable)					
<b>-</b> ""				83		,	·····					
				84	City			FL	85 Zip	Code		
11. Pursuant l	to the provisions of Sections 6	07.0502 and 607.1508, Florida Statute	es, the a	bove	-named	corporat	tion submits this statement for the o		changing	its registered		
office or n agent Tai	egistered agent, or both, in the m familiar with, and accept the	07.0502 and 607.1508, Florida Statut e State of Florida. Such change was a e obligations of, Section 607.0505, Flo	authorize orida Sta	d by	the con	poration's	s board of directors. I hereby accep	t the app	ointment a	s registered		
SIGNATURE.				10.00	•							
	Signature, typed or printed name of regis		E: Registere	d Age	ni signature	dw betkipet e	en reinstating)	DATE				
12.	***************************************	RS AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC	ERS AND				
TITLE	D	DELETE	1.1 7						Change	Addition		
MCGAFFIGAN, ANDREW J				1.2 NAME								
STREET ADDRESS	6243 FORESTWOOD EA	SI DHIVE			ADDRESS							
CHY-ST-ZIP TELE	LAKELAND FL 33811	Louer		ITY - S	( - ZIP	<del> </del>			T 1 A.			
	D NCCAEEROAN III M	DELETE	2.1 Ti				-		Change	Addition		
NAME MCGAFFIGAN, JILL M STREET ADDRESS 6243 FORESTWOOD EAST DRIVE				2.2 NAME								
STREET ADDRESS	LAKELAND FL 33811	SI DRIVE	•		ADDRESS							
CHY-ST-70P TOLLE	DAVEDAID LE 22011	DELETE	2 4 C		T-ZIP	ļ	· · · · · · · · · · · · · · · · · · ·	<del></del>	Change	Addition		
NAME			3.1 II						Change	Addition		
STREET ADDRESS					Annaran							
CITY - SI - ZIP					ADDRESS							
THE		DELETE	4.1 TI	ITY-S	1-28				Change	Addition		
NAME			4.21						- Onlinge			
STREET ADDRESS					ADDRESS							
CITY - S1 - ZIP				ITY-SI								
TOLE	······································	DELETE	5.1 Ti		-211	<del> </del>			Change	Addition		
NAME		<del></del>	5.2 N							Tildanio.		
STREET ADDRESS					ADDRESS							
CITY - ST - ZIF				TY-\$1								
DILE		DELETE	6.1 TI		- 411				Change	Addition		
NAME			6.2 N							1,00,,01		
STREET ADDRESS					ADORESS							
CITY-ST-ZIP				TY-\$1								
	y certify that the information s	upplied with this filing does not qualif				teted in S	Section 119 07/3Vi). Florida Statutor	Literathor	andifu tha	1166		

I. 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.

SIGNATURE

5/5/97

941/648-4597