## 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

	19	96
 		0.00

1. Corporation FLOR	IIDA AFFINITY, INC.	`	•						
	of Business BERT STREET SEE FL 32303	Mailing Address 1117 HÄRBERT STRE TALLAHASSEE FL 32						113 61061	
						3. Date Incorporated or Qualified 34 04/01/1993	a. Date c	1 Last F 1/24/	
2. Principal Pla	ace of Business	2a. Mailing Address 26				4. FEI Number 59-3183620		П	Applied For Not Applicable
Suite, Apt. 1	#, elc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	 1	\$8.7	5 Additional
City & State		City & State				6. Election Campaign Financing			Required
23		28	•			Trust Fund Contribution	] ———		00 May Be ed to Fees
Ζιρ 24]	Country 25	Zip <b>29</b> ]	Country 30	ý		8. This corporation has liability for intan	_	under s	199.032,
	9. Name and Address of Cur	rent Registered Agent		_		10. Name and Address of New Regis	stered Åg	ent	
DADD	EE CHADIEC IIII		81	^	lame				
	ee, Charles J III Harbert Street		82	S	treet Addres	ss (P.O. Box Number is Not Acceptable)			
TALLA	HASSEE FL 32303		83						
			84	C	City		FL	<b>85</b> Z	ip Code
11. Pursuant t	o the provisions of Sections 607.05 ed agent, or both, in the State of FI	02 and 607.1508, Florida Statute orida Such change was authorize	s, the above-i	nan xora	ned corporal	tion submits this statement for the purpose of directors. I hereby accept the appoints	e of chang	jing its aistere	registered office
familiar wit	h, and accept the obligations of, Si	oction 607.0505, Florida Statutes.	,,					9.010.0	o agom , om
SIGNATURE .	Styr after typed or printed name of registered ag		E: Registered Ager	nt sig	nature required v	when reinstating)	DATE		
12.	OFFICERS /	AND DIRECTORS	13.		·	ADDITIONS/CHANGES TO OFFICER			<u></u>
T.TEF NAME	HARDEE, CHARLES J.	☐ DELĒTE	1. 1 TITLE 1.2 NAME				L	Change	☐ Addition
STREET ADDRESS	1117 HARBERT ST		1.3 STREET		DRESS				
C(1Y - S1 - Z)P	TALLAHASSEE FL		1.4 CITY - 5		1				
1011	D	DELETE	2 1 TITLE					Change	Addition
NAME	HARDEE, CHARLES J.		2 2 NAME						
STREET ADDRESS	1117 HARBERT ST. TALLAHASSEE FL		2.3 STREE1						
CITY - S.I - ZIP TITLE	INCLAINSSEL FL	DELETE	2.4 CITY - 5 3. 1 TITLE	ST- 21	IP			Change	Addition
NAM:			3.2 NAME				لبا	Unidingo	
STREET ADDRESS			3 3 STREE	T ADI	DRESS	·	-		
City St-Zin			3.4 CITY - 9	ST-ZI	IP.				
THLF		□ DELETE	4. 1 TITLE					Change	☐ Addition
NAME			4.2 NAME						
STREET ADDRESS			4.3 STREET						
_COTY+S1+ZIP TITU!		DELETE	4.4 CITY - 5 5 1 TO LE	S I - ZI	P		- F	Change	Addition
NAME		<u></u>	5 2 NAME					o.ago	
STREET ADDRESS			5.3 STREET	1 ADE	RESS				
CHY-ST-ZIE			5.4 CITY - S	<u>ST - ZI</u>	P				
THUE		DELETE	6 1 TITLE					Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET						
CHY SI ZIF	v certify that the information supplie	od with this filling is valuntarily furnis	64 CITY - S			the exemption stated in Section 119.07(3	ndo Elocio	a State	toe I further
certify that	the information indicated on this a	nnual report or supplemental annu	al report is tru	ue a	ind accurate	and that my signature shall have the same	e legal ef	ect as	if made under
appears in	Block 12 or Block 13 if changed	or on an attachment with an addre	SS.	ω €	NOCULE ITIS	report as required by Chapter 607, Florida	i SiaiUiteS	and tr	at my name

SIGNATURE:

Charles J. Handle 2/20/96
NG OFFICER ON DIRECTOR

Date

CR2E034 (12/95)