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 # P93000033350 (8)

THE ANDERT CORPORATION

FILED May 07 1997 8:00am Secretary of State



Principal Place of Business Mailing Address					<u> </u>	
804-B ANASTASIA BLVD ST AUGUSTINE FL 32084		1014 PRINCE ROAD ST AUGUSTINE FL 32086-6530				
08					3. Date Incorporated or Qualified 05/04/1993	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt #, etc.		59-3180790 Not Applicable		
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Coun	ry	8. This corporation has liability for	
24	25	[29]	30]			Yes No
	9, Name and Address of Curre	nt Hegistered Agent		<u> </u>	10. Name and Address of New Re	gistered Agent
	ert marilyn L.			1 Name		
	PRINCE RD		8	2 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
SUIT			g	3		
SI. /	AUGUSTINE FL 32086		,	.5		
				4 City	1 A . A . A . A . A . A . A . A . A . A	FL 85 Zip Code
office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Horida. Such change w	as authorized.	by the coroor:	rporation submits this statement for the patient's board of directors. I hereby acceptions	ourpose of changing its registered of the appointment as registered
SIGNATURE	Signature, typed or printed name of registered as	gent and trie if applicable (NOTE: Hegistered A	gent signaturi req.	ured when reinstating)	DAIE
12.	OF FICE RS AT	VD DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELLTE	1.3 1/111			Change Addition
NAME	ANDERT, JOHN B JR		1.2 NAM	ŧ		
STREET ADDRESS	1014 PRINCE ROAD		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	ST AUGUSTINE FL 32086		1.4 CITY	- S1 - Z(P		
TITLE	D	DELETE	2.5 11118			Change Addition C
NAME	ANDERT, MARILYN		2 2 NAM	l l		
STREET ADDRESS	1014 PRINCE ROAD		4	CLADORESS		
CITY-ST-ZIP TITLE	ST AUGUSTINE FL 32086	DELETE		'- S1-7IF		
NAME			3.1 TITLE			Change Addition
STREET ADDRESS			3.2 NAM	ET ADDRESS		
CITY-ST-ZIP				- S1 - 7IP		
TITLE		DELFTE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	- 1		
STREET ADDRESS			43 S1h£	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	- \$1 - ZIP		
TITLE		DFLETE	5 1 THLE			☐ Change ☐ Add-tion
NAME			5.2 NAM	F		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			54 CITY	- ST - 74P		
TITLE		DELETE	61 TF LE			Change Addition
NAME			62 NAM	ŧ		
STREET ADDRESS			63 STRE	ET ADDRESS		
CITY-ST-ZIP	w carlify that the information enough	Sal mills at the Others Harris	6.4 C-1Y	- \$1 - 7 IP		

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 trusted 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.

CONSTIDE & MONILON & and est MARILY 1. ANDERT 4-29 97 (my) 461-330