## 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

STREET ADDRESS

| 1204 ARRORIT FIG.   1204 ARRORIT RD   1204 ARR   | DOCUM<br>1. Corporation N                  | ENT # P9300<br>D A. KRAUSE, P.A.                      | 0034966 (                     | 0)           |            |                    |                                     |                                  |                                    |                |
|--|--|---|-------------------------------|--------------|------------|--------------------|-------------------------------------|----------------------------------|------------------------------------|----------------|
| Superior Row   Supe   | Principal Place of                         | Business  | Maling Address                |              |            |                    | LUBBILOUB HU IBLUB HUM OOTHI 79     | III <b>ud</b> ili) <b>udil</b> i | # 1484 <b>#1810 #8</b> 17 <b>3</b> | UIII BIII IIBI |
| Pursuant of Business   2a. Mulling Address   2b. Mulling Address   | 1234 AIRPORT<br>SUITE 123<br>DESTIN FL 325 | RD  | SUITE 123<br>Destin Fl. 32541 |              |            | 1                  |                                     |                                  |                                    |                |
| Principal Place of Bisseness   28  | ŲS   |   | US                            |              |            |                    |                                     |                                  |                                    |                |
| Suite, Apt. M., etc.    Suite, Apt. M., etc.  | . Principal Plac                           | e of Business   |                               |              |            |                    |                                     |                                  | L                                  | <del></del>    |
| Suite Apt. 4, etc.    27   |  |   |                               |              |            |                    |                                     |                                  |                                    |                |
| Country   28   Country   29   Coun   | <b>-</b>                                   | etc.  | h                             |              |            |                    | 5. Certificate of Status Desired    |                                  | 7                                  |                |
| The stand Contribution   Added to Freeze   Trust Fund Contribution   | Ch. 9 Chala                                |   |                               |              |            |                    | 6. Election Campaign Financing      |                                  | \$5.00                             | May Be         |
| Zp   | City & State                               |   | <b>⊢</b> ···· լ               |              |            |                    | Trust Fund Contribution             |                                  |                                    |                |
| 9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Street Address (P.O. Box Number is Not Acceptable)  86 City FL 85 Zip Code  87 Code  88 City FL 85 Zip Code  89 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 City FL 85 Zip Code  80  |  | Country   |                               | man or one   | ountry     | . 22.1             |                                     |                                  | e tax under s                      | 199.032,       |
| RRAUSE, RICHARD 1234 AIRPORT RD DESTIN FL 32541  82   Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip Code  85   Street Address (P.O. Box Number is Not Acceptable)  85   Zip Code  86   City   FL   85   Zip Code  86   City   FL   85   Zip Code  87   City   FL   85   Zip Code  88   City   FL   85   Zip Code  89   City   FL   85   Zip Code  89   City   FL   85   Zip Code  80   City   FL   85   Zip Code  81   City   FL   85   Zip Code  82   City   FL   85   Zip Code  83   City   FL   85   Zip Code  84   City   FL   85   Zip Code  85   City   FL   85   Zip Code  86   City   FL   85   Zip Code  87   City   FL   85   Zip Code  87   City   FL   85   Zip Code  88   City   FL   85   Zip Code  89   City   FL   85   Zip Code  80   City   FL   85   Zip Code  80   City   FL   85   Zip Code  81   City   FL   85   Zip Code  82   City   FL   85   Zip Code  83   City   FL   85   Zip Code  84   City   FL   85   Zip Code  85   Zip Code  86   City   FL   85   Zip Code  86   City   FL   85   Zip Code  86   City   FL   85   Zip Code  87   City   FL   85   Zip Code  88   City   FL   85   Zip Code  89   City   FL   85   Zip Code  89   City   FL   85   Zip Code  80   City   FL   85   Zip Code  80   City   FL   85   Zip Code  80   City   FL   85   Zip Code  81   City   FL   85   Zip Code  82   City   FL   85   Zip Code  83   City   FL   85   Zip Code  84   City   FL   85   Zip Code  85   City   FL   85   Zip Code  86   City   FL   85   Zip Code  87   City   FL   85   Zip Code  88   City   FL   85   Zip Code  89   City   FL   85   Zip Code  80   City   FL   85   Zip Code  80   City   FL   85   Zip Code  80   City   FL   85   Zip Code  81   City   FL   85   Zip Code  81   City   FL   85   Zip Code  82   City   FL   85   Zip Code  83   City   FL   85   Zip Code  84   City   FL   85   Zip Code  85   City   FL   85   Zip Code  86   City   FL   85   Zip Code  87   | <u>ה</u>                                   |   |                               | 30           |            |                    |                                     |                                  | d Agent                            |                |
| SECURITY FOR THE PURPOSE OF Sections 607,0502 pm 807,1508, Florate Statutes, the above named corporation submits this statement for the purpose of changing its registered against with, and so the state of Florate Statutes, the above named corporation submits this statement for the purpose of changing its registered or registered against with, and so the state of Florate Statutes, the above named corporation is stantist this statement for the purpose of changing its registered or registered against with, and so the state of Florate Statutes. Thereby accept the appointment as registered against with and submits this statement for the purpose of changing its registered registered against with and submits this statement for the purpose of changing its registered against with an appointment as registered against vitoria. Thereby accept the appointment as registered against vitorial state appointment as registered against vitorial states. The purpose of changing its registered programs with a statement for the purpose of changing its registered programs. The purpose of changing its registered programs with a statement for the purpose of changing its registered programs with a statement for the purpose of changing its registered programs. The purpose of changing its registered programs was authorized by the corporation's board of directors. I hereby accept the appointment as registered programs. The purpose of changing its registered programs was authorized by the corporation's board of directors. I hereby accept the appointment as registered programs are purposed of changing its registered programs are purposed programs are purposed programs are purposed programs. The purposed programs are purposed programs are purposed programs are purposed programs are purposed programs. The purposed programs are purposed programs are purposed programs are purposed programs are purposed programs. The purposed programs are purposed programs are purposed programs are purposed programs are purposed programs. The purposed programs ar   |  | 9. Name and Address of Curre                          | ent Registered Agent          |              | -          | N. Innova          | 10. Name and Address of New         | negistere                        | o Agein                            |                |
| 1234 AIRPORT RD DESTIN FL 32541  84 City  FL 85 Zip Code  17. Pursuant to the provisions of Socions 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent to poth, in the State of Florida Statutes the above named corporation submits this statement for the purpose of changing its registered agent to poth, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent to provide the obligations of Socion 607,0505, Florida Statutes  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  IT THE  WRAUSE, RICHARD A  SIRRET ADDRESS  GOZ GRENADA WAY  NOFMILE FL 32578  DELETE  DELETE  1 1 INTE  2 1 INTE  2 2 NAME  2 3 SIRRET ADDRESS  GOZ GRENADA WAY  NOFMILE FL 32578  DELETE  3 1 INTE  2 2 NAME  3 3 SIRRET ADDRESS  GOY S1-2P  DELETE  3 1 INTE  3 1 INTE  4 1 INTE  4 1 INTE  5 1 INTE  |  |   |                               |              | 01         |                    |                                     |                                  |                                    |                |
| DESTIN FL 32541    84  |  |   |                               |              | 82         | Street Add         | ress (P.O. Box Number is Not Accept | able)                            |                                    |                |
| DESTIN FL 32541    B4  |  |   |                               |              | 63         |                    |                                     |                                  |                                    |                |
| The presunt to the provisions of Sections 607,0502 and 607,1508; Richada Statutes, the above named corporation submits this statement for the purpose of thoughing its registered agent, or poster of present the obligations of Section 607,0502, Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered agent. I familiar with, and accept the obligations of Section 607,0503, Florida Statutes.  SIGNATURE   | DESTIN 1                                   | FL 32541  |                               |              |            |                    |                                     |                                  | Tag   7.                           | Code           |
| Pursuant to the provisions of Soctions 607.0502 and 807.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing as registered agent, on-join, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I familiar with, and purpose the obligations of Soction 607.0506, Florida Statutes.    SIGNATURE   |  |   |                               |              | 84         | City               |                                     | F                                | :L  85   4                         | ) Code         |
| D  | SIGNATURE _                                | norature in posición printed name of relijsterent alp | - Carel the diapprovation     | (NOTe Hogste |            | d Signature reduce | ADDITIONS/CHANGES TO C              | DEFICERS A                       | 19/9C<br>AND DIRECTO               | PRS IN 12      |
| Table  | 12.  |   |                               |              |            |                    |                                     |                                  |                                    |                |
| 13 STREET ADDRESS  | Į  | <del>-</del>  | _                             | 1:           | 2 NAME     |                    |                                     |                                  |                                    |                |
| 14 CITY - ST - ZP  |  |   |                               | 1            | 3 STREET   | I ADDRESS          |                                     |                                  |                                    |                |
| DELETE   2 : 11/16   |  |   |                               | 1            | 4 CHY - S  | ST - Z:P           |                                     |                                  | 57.0                               |                |
| 23 STREET ADDRESS   24 CHY-ST-ZIP   Change   AC  |  |   | ☐ DELETE                      | 2            | 1 TITLE    |                    |                                     |                                  | Unange                             | ☐ Admin        |
| 24 City - ST - ZiP   | NAME                                       |   |                               | 2            | 2 NAME     |                    |                                     |                                  |                                    |                |
| DELETE   DELETE   3   1   1   1   1   1   1   1   1   1  | STREET ADDRESS                             |   |                               |              |            |                    |                                     |                                  |                                    |                |
| DELETE   STREET ADDRESS   STREET ADDRE   | CITY · ST-ZIP                              |   | (**) hc  F **                 |              |            |                    |                                     |                                  | ☐ Change                           | nc-fibbA 🔲     |
| 33 STREET ADDRESS   34 C/TY - S1 - 7/P   | TITLE                                      |   | [] beces                      | - 1          |            | 1                  |                                     |                                  |                                    |                |
| 34 CTY - ST - ZIP  | NAME                                       |   |                               |              |            |                    |                                     |                                  |                                    |                |
| DELETE   DELETE   Change   ACTION  | STREET ADDRESS                             |   |                               |              |            | 1                  |                                     |                                  |                                    |                |
| AZ NAME  |  |   | DELFTE                        |              |            |                    |                                     |                                  | Change                             | Addition       |
| STREET ADDRESS   43 STREET ADDRESS   44 CHY-ST-ZIP   | '  |   |                               | 4            | 1.2 NAME   |                    |                                     |                                  |                                    |                |
| CHY-ST-ZIP   |  |   |                               | 4            | 4.3 STREE  | EL ADDRESS         |                                     |                                  |                                    |                |
| THE  |  |   |                               | 4            | 4.4.C:1Y - | S1 - ZiP           |                                     |                                  | Change Change                      | FT Addition    |
| 1   1   1   1   1   1   1   1   1   1  |  |   | DELETE                        |              |            |                    |                                     |                                  | unange                             | Addit or       |
| SPRECH ADDRESS   SACITY - ST - ZIP   | NAME                                       |   |                               | 1            |            |                    |                                     |                                  |                                    |                |
| TITLE DELETE 6.1 TITLE 10001848699 AME 62 NAME -06/03/9601063038 5/  | STREET ADDRESS                             |   |                               |              |            |                    |                                     |                                  |                                    |                |
| TITLE  62 NAME  62 NAME  62 NAME  64 NAME  64 NAME  65 NAME  65 NAME  66 NAME  66 NAME  66 NAME  66 NAME  67 NAME  68 NA | CITY-ST-ZIP                                |   | C ACCET                       |              |            |                    | 4 (**) (**) (**)                    | 2.4 ©                            | C Clande                           | Addit-or       |
| MME  | TITLE                                      |   | [] DEFEIR                     | 1            |            | ľ                  | _06 \03\06~~0<br>T Chinhin T g      | 11063-                           | -038                               | 5/             |
|  | NAME                                       |   |                               |              |            |                    | ***200.00                           |                                  | -millione,                         | 7,             |

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)/ki. 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 certify 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 13 if change 0 or on an attachment with an address. n 6 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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