FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

2a. Mailing Address

SUITE 410

26

280 WEST CANTON AVENUE

WINTER PARK FL 32789-3168

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Secretary of State

3a. Date of Last Report 04/19/1996

Applied For

Not Applicable

3. Date Incorporated or Qualified

08/04/1993

59-3194456

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300054537 (4)

POHL & SHORT, P.A.

Principal Place of Business

200 WEST CANTON AVENUE

2. Principal Place of Business

WINTER PARK FL 32789

SUITE 410

21

Suite, Apt	#, etc.	Suite, Ap	pt. #, etc.				5. Certificate of Status Desired See Required Fee Required	
City & State		City & S	tate				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29	[30	0		Florida Statutes Yes No	
	9. Name and Address of Current	Registered Ag	ent		1		10. Name and Address of New Registered Agent	
POH	IL, FRANK L				81	Name		
280 W CANTON AVE					82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
SUN	E 410							
WINTER PARK FL 32789					83			
					84	City	85 Zip Code	
							FL Y	
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 registered 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. La	m familiar with, and accept the obliga	tions of, Section	607.0505, Flo	rida Stat	utes			
SIGNATURE	e					 	required when reinstating) DATE	
12.	Signification of practical name of registered agen OFFICERS AND		. (NOTE	Hogistere	a Ager	it signature req	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	DIVE OF CITE	DELETE	1.1 1)	TLE	···	Change Addition	
NAME	POHL, FRANK L			1.2 N		ļ		
STREET ADDRESS	AND THE CALL OF ALL POPULATION					ADDRESS		
City - St - Zip	WINTER PARK FL	•			TY - \$1			
TITLE	7011121117011112		DELETE	2.1 1			Change Addition	
NAME				2.2 N	AME	1		
STREET ADDRESS				2.3 S	TREET	ADDRESS		
CITY-ST ZIF				2.40	aTY-S	T-ZIP		
TrTLE			DELETE	3.1 T)	TLE		Change Addition	
NAME				3.2 N	AME			
STREET ADDRESS				3.3 \$	TAEET	address	ı	
CITY ST-75				3 4. 0	ATY-S	T-ZIP		
HILE			DELETE	4 1 T	TLE		Change Addition	
NAME				4.21	AME		•	
STREET ADDRESS				4.3 S	TREET.	ADDRESS		
City-St-ZP			Delete		IFY-SI	I-ZIP	Change Addition	
THE			DELETE	5.1 1			TT Cikinife TT vanimo	
NAME				5.2 N				
STREET ADDRESS						ADDRESS		
CITY - ST - ZIF		m	DELETE	6.1 T	(TY - 5)	I - ZIP	Change Additio	
THILE			L.,J ULLCIL	6.2 N			C. Cridingo C. Assumo	
NAME ether Languages						ADDRESS (
STREET ADDRESS COTY+S1+ZIP		_			ITY-S			
14. I do here	14. If do hereby certify that the information supplied with this filing flors 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 supplier ental 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 tousies employing 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 attacking it an appears.							
SIGNAT	URE: SIGNATURE AND TYPED OR	PRINTED NAME OF	SIGNING OFFICER	AP. N. P. C	TOR		9/81/97 (401) 647-7641 Date Daytime Phone #	