AMOUNT DU	D NOTICE: CORPORATION WIL	LL BE DISSOLVED ON OR AFTER A DISSOLVED, MINIMUM AMOUNT DUE	AUGUST 7, 1996.		
СО	PROFIT PROPATION JUAL REPORT 1996	FLORIDA DEPAR  Sandra B  Secretary  DIVISION OF C	IMENT OF STATE  Mortham  y of State		
DOCL		000056748 (5)	- <u>- ,                                 </u>		
	B ASSOCIATES, INC.	000000740 (0)			
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•	ce of Business	Mailing Address		4 (001/001, 1) <b>0 (11/0)</b> (1)11/ <b>18/</b> (1/ <b>08</b> (	(* 6517), 6670); 61110 61111 16911 \$1667 (611 1661)
5752 12TH / NAPLES FL		5752 12TH AVE NW NAPLES FL 33999			
				3. Date Incorporated or Qualifie 08/09/1993	3a. Date of Last Report 03/16/1995
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	t. #, etc	Suite, Apt #, etc.		65-0430343	Not Applicable \$8.75 Additional
City & Sta	ate	City & State		Certificate of Status Desired     Election Campaign Financing	Fee Required
Zip	Constant	28		Trust Fund Contribution	Added to Fees
341		<sup>Zip</sup> 34119	Country 30	8. This corporation has liability Florida Statutes	for intangible tax under s. 199,032, Yes No
	9. Name and Address of Co	urrent Registered Agent	81 Name	10. Name and Address of New	
	ÖLEMAN, J M 174 E TAMIAMI TRAIL			ress (P.O. Box Number is Not Accep	tuble)
	APLES FL 33962-5793		1-1 0110017100	iloss (il.e. box Namber is Not Accep	eiole)
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	A to the angular and Constitution (Constitution)		84 City		FL 85 Zip Code
11. Pursuani		7,0502 and 607,1508, Florida Statutes State of Florida Such change was aut Deligations of Section 607,0505, Florid	84 City	poration submits this statement for the ion's board of directors. I hereby acc	
11. Pursuant office or agent. I	am familiar with, and accept the c	obligations of, Section 607.0505, Flori	84 Crty : the above-named corp thorized by the corporati da Statules.	ion's board of directors. Thereby acc	
11. Pursuani	am familiar with, and accept the c	obligations of, Section 607.0505, Flori	84 City	on's board or directors. Thereby acc	purpose of changing its registered ept the appointment as registered
11. Pursuant office or agent to SIGNATURE	Signation by star professional Confession Of LICERS	obligations of, Section 607,0505, Flori digient and time trapping the (MOTE	84 City  the above-named corplinarized by the corporation da Statules.  Solved Agent signature required.	on's board or directors. Thereby acc	purpose of changing its registered ept the appointment as registered
11. Pursuani office or agent 1. SIGNATURE 12. IIILE	Signative type for professional consecutive of FICERS  P  NEWBERRY, JOHN H	SAND DIRECTORS	84 City  the above-named corporation of the corpora	on's board or directors. Thereby acc	purpose of changing its registered ept the appointment as registered
11. Pursuani office or agent 1. SIGNATURE 12. TITLE NAME STREET ADDRESS	Signatur byset or profest our active classes  OFLICERS  P  NEWBERRY, JOHN H  5752 12TH AVE NW	SAND DIRECTORS	84 City  I the above-named corporation of the corpo	on's board or directors. Thereby acc	purpose of changing its registered ept the appointment as registered  DATE  FICERS AND DIRECTORS IN 12  Change Addition
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made under oath, that I am an officer order of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or or: an attachment with an address

SIGNATURE:

J. M. W. Market or or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or or: an attachment with an address

SIGNATURE:

J. M. M. M. M. M. H. NEWBERRY 4 30 96 (941)597-8090