## 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 # P93000081665 (0)

FINALLY FREE, INC.

## FILED Jan 31 1997 8:00am Secretary of State

Principal Place 401 CUDDY CO NAPLES FL 341	URT	Mailing Address P.O. BOX 7216 NAPLES FL 34101-7216	P.O. BOX 7216				. 48181 18141	HEID BILLE RUB	i filit (66)
						3. Date Incorporated or Qualified 11/30/1993		ate of Last R 24/1996	leport
2. Principal P 21	ace of Business	2a. Mailing Address			<del></del>	4. FEI Number 59-3222803			pplied For ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional equired
Crty & State	)	City & State	City & State			6. Election Campaign Financing	·····	\$5.00	May Be
<b>23</b> Zip	Country	Zip	Cou	ntry	<del></del>	Trust Fund Contribution  8. This corporation has liability for		tax under s	to Fees s. 199.032,
24	9. Name and Address of Curre	nt Registered Agent	30			Florida Statutes  10. Name and Address of New Re	Yes [		
SCE	ARCE, DAVID EARL	in Registered Agent		81	Name	10. Name and Address of New Ne	Bistelen	Wholir	
401 CUDDY COURT				82	Street Adde	ess (P.O. Box Number is Not Acceptab	ala)		
NAPLES FL 34103				83	Street Addit	ess (r.o. box riumber is not Acceptat			
				03					
				84	City		FL	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	tutes, the al	DOVE	-named corp	oration submits this statement for the p	ournose o	f changino i	ts registered
office or r agent I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change wa galions <b>25</b> , Section 607.0505,	s autnorize Florida Stat	utes	rtne corpor <b>a</b> ti s.	ion's board of directors. I hereby accep	pt the app	ontment as	, registered
SIGNATURE	David Enf	Lecares							
12.	Signature Typed or printed name of registrated ag	jent and tillo if applicable ( ND DIRECTORS	NOTE Registerer	d Age	nt signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE CERS ANI	DIRECTO!	RS IN 12
TITLE	D	DELETE	1.1 TI	TLE		ADDITIONO/OFFANGEO TO OFF K	JENO 711	Change	Addition
NAME	SCEARCE, DAVID E		1.2 N/	AME					
STREET ADDRESS	401 CUDDY COURT		1.3 \$1	REET	ADDRESS				
CITY - S1 - ZIP	NAPLES FL 34103		1.4 0	TY-S	T-ZIP				
TITLE	D	[_] DELETE	2111					Change	Addition
NAME	SCEARCE, ELIZABETH S 401 CUDDY COURT		22 N			w.·	1.*		
STREET ADDRESS	NAPLES FL 34103				ADDRESS				
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STREET ADDRESS					ADDRESS				ŀ
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NAME			4.2 N	IAME					ļ
STREET ADDRESS			4.3 S1	TREET	ADDRESS				
CITY-ST-7IP			4.4 C	ITY-S	T-ZIP				
TITLE		DELETE	5.1 Ti	TLE				☐ Change	Addition
NAME			5.2 N						ļ
STREET ADDRESS			5.3 \$	TREET	ADDRESS				
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TITLE		DELETE .	6.1 TI					Change	Addition
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STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			6.4 C	TY-\$	T-ZIP				

14. I do hereby certify that the information supplied with this filing 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 trustee 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.

SIGNATURE: Clisabeth

CUSAULA A BRUSCE BURGERAL SIGNAL OF SIGNAL OF

1/27/97 94

941-403-1788

Phone #