PROFIT CORPORATION ANNUAL REPORT 1996		FI	FLORIDA DEPARTMENT OF STATE Sandra B. Morthan: Secretary of State LIIVISION OF CORPORATIONS					
1. Corporation	MENT # P9 CORPORATION	30000823	80 (5)		1 1004/4001 129 10100 11111 00114	<b></b>	NATA OL <b>aro</b> kondi karok abko k	la Li
Principal Place of Business Mailing Address  14201 CAROL MANOR DRIVE 14201 CAROL MANOR DRIVE								
LARGO FL	34644		FL 34644	-	3. Date Incorporated or Qualific		of Last Report	
2. Principal Pl	lace of Business	2a. Mailing	Address		11/22/1993 4. FE: Number	0	5/01/1995 Applied Fo	
21 Suite, Apt.	# elc	26 Suite	Nest H at a		59-3214391		Not Applic	able
22		Suite A	Apt. #, etc		5. Certificate of Status Desired		\$8.75 Additional Fee Required	al
City & State	e	Orty & 5	State		6. Election Campaign Financing	' <sub>□</sub>	\$5.00 May Be	,
Zıp	Country	Zip		Country	Trust Fund Contribution  8. This corporation has liability		Added to Fees x under s 199.032.	
24	9. Name and Address	29 of Current Registered A	gent 30		Fiorida Statutes 10. Name and Address of New	res 📝 No		
600 CLI SUITE 7 CLEARV 11. Pursuant tor register familiar wit	WATER FL 34615  to the provisions of Sections red agent, or both, in the Stath, and accept the obligation.  Signature transfer protest name of reg.  OFFIG.	s of Section 607,0505, Fix Section 2017,0505, Fix CERS AND DIRECTORS	orida Statutes.	83 84 City	ration submits this statement for the address of directors. Thereby accept the a ADDITIONS/CHANGES TO C	FL purpose of cha ppointment as	registered agent. I ar	m
NAME STREET ADDRESS CITY+ST_ZIP	COOK, GEORGE W % 14201 CAROL MA LARGO FL 34644	NOR DRIVE		1.2 NAME 1.3 STREET ADDRESS 1.4 City+St-Zip			- <del>-</del>	E034 (12/95)
NAME STHEET ADDRESS CITY-ST-ZIP	D COOK, NORMA L % 14201 CAROL MA ŁARGO FL 34644	_		2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY STIZE			Change Addita	<sub>on</sub>
TITLE NAME STREET ADDRESS CHTY-ST-ZIP	D Cook, William T % 14201 Carol Ma Largo Fl 34644		] DELETE	3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - S1 ZIP			] Change □ Additio	on
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•		) DELETE :	4 1 TIBLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CHY-SE ZIP			) Change □ Additio	on
TITLE NAME STREET ADDRESS CHY-ST-ZIP		<u> </u>	DELETE	5 1 THEE 5 2 NAME 5 3 STHEE' ADDRESS 5 4 CITY - S' - Z-P			Change Addition	)rı
TITLE NAME STREET ADDRESS CITY - ST - ZIP	contibuted the information		DELFTE	5 1 TITLE 5 2 NAME 6 3 STREET ADDRESS 5 4 CITY - ST- ZIP			Change Addition	
oath; that I	am an officer or director of t Block 12 or Block 13 if chan	he corporation or the rece	ver or trustee empo with an add diss	on is true and accuration wered to execute this	or the exemption stated in Section 11 to and that my signature shall have it is report as required by Chapter 607,	ie same legal e Florida Statutes		