FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State

DIVISION OF CORPORATIONS

1996

P93000083251 (7)

MARCAM INC.

DOCUMENT #
1. Corporation Name

Principal Place	of Business	Mailing Address			
	DGEWOOD AVENUE LYTONA FL 32119		SEWOOD AVENUE ONA FL 32119		
				3. Date incorporated or Qualified 11/22/1993	3a. Date of Last Report 03/22/1995
2. Principal Pla	ice of Business	2a. Maling Addre	38	4. FEI Number	Applied For
21		26		59-3213228	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #,	etc.	5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30	This corporation has liability for influence of the Horida Statutes Yes Yes	ntangibie tax under s. 199.032,
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
	RON, JOSEPH W S. RIDGEWOOD AVENUE		82 Street A	ddress (P.O. Box Number is Not Acceptab	ie)
SOUTH DAYTONA FL 32119			83		
00011	IT DATIONALIE DELIIO		84 City		FL 85 Zip Code
				the table of the sale for the sale	
or registere	o the provisions of Sections 607.00 ed agent, or both, in the State of FI th, and accept the obligations of, Se	lorida. Such change was a	authorized by the corporation sit	poration submits this statement for the pur loard of directors. Thereby accept the appr	outment as registered agent. I am
SIGNATURE _					
	Signature, typed or probed none of representa-	gentand too Cappleatre AND DIRECTORS	(NO*E Franctional Agent signature re-	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
12.	D OFFICERS	F) DELE		Applitoria del la fectiona de la fectiona del la fectiona de la fe	Change Addition
TITLE	CAMERON, JOSEPH W		1.2 NAME		
NAME STREET ADDRESS	1835 S. RIDGEWOOD A	VENHIE	1.3 STREET ADDRESS		
•	SOUTH DAYTONA FL 32		1.4 CHTY - ST - ZIP		
TITLE	D	[] DELE			Change Addition
NAME	CAMERON, MARK D		2.2 NAME		
STREET ADDRESS	1835 SO RIDGEWOOD	AVE	2.3 STREET ADDRESS		
CITY-ST-ZIP	SO DAYTONA FL		2.4 CITY - ST. ZIP		
TITLE		DELF	TE 3 1 TITLE		☐ Change ☐ Add-tion
NAME	ļ		3 2 NAME		
STREET ADDRESS	j		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY - ST - ZIP		
TiTLE		☐ DELE	ETE 4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP					
742.5	1		4.4 CITY - ST - ZIP		Charles C Addition
TITLE		DELI	TL 5.1 TITLE		Change Addition
NAME		DELI	5 1 TITLE 5 2 NAME		☐ Change ☐ Add-tion
		☐ DELI	TE 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS		Change Addition
NAME STREET ADDRESS CITY - ST - ZIP			TL 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - 7IP		
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DEFI	TE 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 6 1 T.TLE		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			TE 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST-ZIP 6 1 T.TLE 5 2 NAME		
NAME STREET ADDRESS CITY-ST-ZIP TITLE			TE 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 6 1 T.TLE		

For the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated in 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 disapply of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 (that have a state of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 (that have a state of the corporation of the cor

SIGNATURE:

516-96. 904-761-47701

CR2E034 (12/95)