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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Wortham
Secretary of State
DIVISION OF CORPORATIONS

5661111	
DOCUMENT	#
<ol> <li>Corporation Name</li> </ol>	

SIGNATURE:

P93000087834 (6)

BOWE Principal Place	N & CAMPIONE, P.A.	Mailing Address			
600 JENNING EUSTIS FL 3 US		PO BOX 926 Eustis FL 32127 Us			
		00		3. Date Incorporated or Qualified 01/01/1994	3a. Date of Last Report 04/17/1995
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3215482	Not Applicable
Suite, Apt. #	F, etc.	Suite. Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Hequired
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation has liability for	Added to Fees
24	25	29 32727	30		s No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New I	Registered Agent
			81 Name		
	NE, DAVID M		82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)
	ININGS AVE				
EUSTIS	FL 32728		83		
			84 City		85 Zip Code
44 5					
familiar witi	ed agent, or both, in the State of Florid h, and accept the obligations of, Section	ia. Such change was author	izeo dy the corporation's boa	oration submits this statement for the pu and of directors. I hereby accept the app	rpose of changing its registered office pointment as registered agent. I am
SIGNATURE _	Skiphatives hypest on printed name of registered agent a	a distribución de la companya de la	OTal Roy Tened Agreet eginethe Austr	edia bar na statura	59416
12.	OFFICERS AND		13.		FICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1 1 THUE	, 2	Change
NAME	Campione, David M		1.2 NAME		
STREET ADDRESS	19345 SPRING OAK DRIVE		1.3 STREET ADDRESS 🥱	H317 Windley (	incle
CITY-ST-ZIP	EUSTIS FL		14 CITY - ST - ZIP	ustis, FI 32786	
THLE	D	☐ DELFTE	2 1 TIFLE	,	Change Addition
NAME	BOWEN, LENNON E III		2.2 NAME		
STREET ADDRESS	318 E. ORANGE AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	EUSTIS FL 32726	Filotoria	2 4 CITY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·
NAME		DECE IE	3 1 TITLE		Change Addition
STREET ADDRESS			3 2 NAME		
CITY-ST-ZIP			3 3 STREET ADDRESS		
T.TLE		[] DELE FE	3.4 CITY - ST - ZIP 4.1 TITLE		Change El tablico
NAME			4 1 11/LE 4 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5 1 T T(F		Change Addition
NAME			5.2 NAME		El change El youther
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 Cily-SI-ZiP		
TITLE		☐ DELETE	6 1 THTLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
			6.4 CHY+ST+ZIP		
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that I oath; that I	certify that the information supplied with the information judicated on this arenul annian officer of cerebian of the conformation of the cerebian of the conformation of the cerebian of	ith this filmer is voluntarily fun Francia or Shaplemental and	6 2 NAME 6 3 STREET ADDRESS 6 4 CHY: ST-ZIP nished and does not qualify nual report is true and accurate to	for the exemption stated in Section 119 ate and that my signature sha'l have the is report as required by Chapter 607, Fi	.07(3)(k), Florida Statutes. I furt

352,589 1414 Claytime Phone it