FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

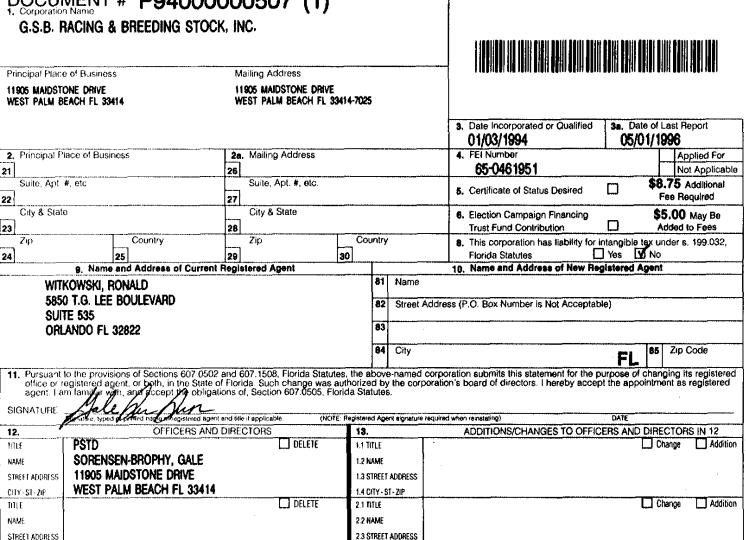
Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400000507 (1)

Principal Place of Business	Mailing Address
11905 MAIDSTONE DRIVE WEST PALM BEACH FL 33414	11905 MAIDSTONE DRIVE WEST PALM BEACH FL 33414-7025

FILED May 06 1997 8:00am Secretary of State



SIGNATIONE.	priative, typed of primed name invegistered agent and title if applicat	ole. (NOTE: Ri	egistered Agent eignature	re required when reinstating) DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE	Change Addition
NAME	SORENSEN-BROPHY, GALE		1.2 NAME	
STREET ADDRESS	11905 MAIDSTONE DRIVE		1.3 STREET ADDRESS	
CHTY-ST-ZIF	WEST PALM BEACH FL 33414		1.4 CITY - ST - ZIP	
TITLE		☐ DELETE	2.1 TITLE	Change Addition
NAME	·		2.2 NAME	
STREE1 ADDRESS			2.3 STREET ADDRESS	
CITY - ST- ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
C-TY - ST - ZIP			3.4. CITY - ST - ZIP	
TITLE		DELETE	4,1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - ST - ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADORESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME			62 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	stated in Section 119 07/31(i) Florida Statutes I further certify that the

recommendation and the minimum supplied with this timing does not quality for the exemption istated 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

SIGNATURE:

Daylime Phone #