## 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 # P94000019223 (4)

## **FILED** May 02 1997 8:00am Secretary of State

Principal Place of Business  Mailing Address  3465 GULF OT MEXICO DR. LONGWOOD KEY FL 34228  LONGWOOD KEY FL 34228												
									3. Date Incorporated or Qualified 03/07/1994		ate of Last   07/1996	Réport
2. Principal	Place of Business		2a. Mailin	g Address			· <u>"</u>		4. FEt Number 65-0475717		A	Applied For Not Applicabl
Suite, Apt. #, etc.			Suite, Apt #, etc.					5. Certificate of Status Desired				
City & Sta	ate		City &	State					Election Campaign Financing     Trust Fund Contribution			May Be
Z(p)	Cou	ntry	Zip		Cou	untry			This corporation has liability for			
24	[25]		29		30	<del></del>	<del></del>			aeY [		
	g, Name and Adi	dress of Current	Registered /	Agent		81	Nome		10. Name and Address of New Re	glatered	Agent	
MERCURIO, JOHN J						0'	Name					
	S S. ORANGE AVE. RASOTA FL 34236			82	Street	Addres	ddress (P.O. Box Number is Not Acceptable)					
) JA	INSUINTE STESS					83	ļ <u>-</u>					
						84	City			FL	85 Zip	Code
olfice or agent I SIGNATURE									ration submits this statement for the part board of directors. I hereby acce	pt the app	changing ointment a	its registered s registered
12.		OFFICERS AND			13.	-			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	D			DELETE	1,17	ITLE					Change	Additio
NAME	SWEENEY, JOHN				1.2 N	AME						
STREET ADDRESS							ADDRESS					
CITY - ST - ZIP	LONGBOAT KEY	FL 34220		DELETE	2.1 3	ITV-S	it - ZIP	<del> </del>			Change	Additio
NAME	GORDON, DOUG	LAS JC		Las Decemb	2.21			}	•		orange	L. Maditio
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CITY - S1 - ZIP	WEYBRIDGE SU	rrey england	l		2.4	CITY-S	ST-ZIP					
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NAME					3.21							
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NAME						IAME	ADDRESS					
STREET ADDRESS	`						ADDRESS	ĺ	-			
Clly-S1-ZiP					6.40	JIY-S	ST-ZIP	<u></u>				

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 alreport 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: