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

Mailing Address

**SUITE 3575** 

100 NORTH TAMPA STREET

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000027136 (8)

IMESON CENTER, INC.

Lam an officer or director of the corporation or appears in Block 12 or Block 13 if changed

SIGNATURE:

Principal Place of Business

ONE IMESON PARK BLVD BUILDING 100

Surice, Apl #, etc.  City & State  City & State  Ze  Country  Repulsed Agent  Ze  Country  Repulsed Agent  Ze  Country  Repulsed  Ze  Ze  Country  Ze  Ze  Ze  Ze  Ze  Ze  Ze  Ze  Ze  Z	JACKSONVILLE FL 33218		TAMPA FL 33602-5830							
Suite. Apt P, etc.  Suite.	US						04/08/1994 05/0		•	
Surio, April #, cfc.    Surio, April #, cfc.	2. Principal Place of Busin	28. Mailing Address	28. Mailing Address							
Coy & State    State	21	26				59 <b>78</b> -3288511				
City & State   City & City & State	Suite, Apl. #, etc.	<del></del>				6. Certificate of Status Desired				
Added to Fees   Trust Fund Contribution   Trust							6. Election Campaign Financing	\$5.0	May Be	
Zip   Country   Zip   30   30   8. This corporation has liability for intenglible tax under s. 199.032   190. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Nam	23		28				Trust Fund Contribution	Adde	d to Fees	
Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes with and accept the chigation of, Section 607,0508, Florida Statutes  \$11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes with and accept the chigation of, Section 607,0508, Florida Statutes  \$10. August 1, 10. Au	Zip	Country	Zıp	L Co	untry	'			r s. 199.032,	
NEWTON, ARIS 1 MESON PARK BLVD. BILLIDNIO 100 JACKSONMILE FL 32218  80 61 62 63 64 64 67 67 68 67 68 68 68 68 68 68 68 68 68 68 68 68 68	24			30						
NEWTON, ARIS  1 IMESON PARK BLVD. BUILDING 100  JACKSONVILLE FL 32218   44 City  FL  65 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent. an internation with, and accept the obligations of, Section 607 0505, Provide Statutes  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  NEWTON, ARIS  SIGNATURE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  NEWTON, ARIS  13700 SUTTON PARKE DR., #126  14. CITY-S1-2P  JOKSONVILLE FL  DELETE  1.1 TITLE  Change Addition  NEWTON, ARIS  13700 SUTTON PARKE DR., #126  14. CITY-S1-2P  JOKSONVILLE FL  DELETE  2. NAME  NEWTON, PARK  2. NAME  1. SIRRET ADDRESS  1. STREET ADDRESS  1. ST	9. Name	and Address of Current	Registered Agent		ļ.,	r	10. Name and Address of New Registered A	gent		
BUILDING 100  JACKSONVILE FL 32218  B4 City  FL B5 Zip Code  11. Pursuant to the provisions of Sections 607 6502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered segent. or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent Lam familiar with, and accept the obligations of Section 607 6505. Florida Statutes  SIGNATURE  Signature for the purpose of changing its registered agent and accept the obligations of Section 607 6505. Florida Statutes  SIGNATURE  D0	NEWTON, ARIS				81	Name				
BUILDING 100  JACKSONVILE FL 32218    53     54					82	Street A	Idress (P.O. Box Number is Not Acceptable)			
Section   Sect	BUILDING 100									
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, section 607 0505, Florida Statutes agent. I am familiar with, and accept the obligations of, section 607 0505, Florida Statutes  SIGNATURE  Signature, byted in principlature of regulated agent	JACKSONVILLE FL 32218				83					
11. Fursuant to the provisions of Sections 607 6502 and 607 1508. Florida Statutes. The above-nemed corporation submits this statement for the purpose of changing its registered egid. To tools, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered egid. To tools, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The corporation's board of directors. I hereby accept the appointment as registered egid. The appointment egid. The appointment as registered egid					84	City	FI	<b>85</b> Zi	p Code	
office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligations of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of, Section 607.0505, Florida Statutory and accept the obligation of the obli	11. Pursuant to the provis	sions of Sections 607 0502	and 607 1508. Florida Statu	tes the a	boy	e-named	. <del></del> .	hanging	its registered	
SIGNATURE    Sign states, bysed or provind rame of regulated agent and lite if applicables   (NOTE Registered Agent explaine required when reliability)   DATE	office or registered as	gent, or both, in the State of	of Florida Such change was	authorize	d by	the corp	poration's board of directors. I hereby accept the appo	intment a	as registered	
Sign at any place or per land amone of rego-lawered agreen and site Lagranciates  OF FICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PO NEWTON, ARIS 13700 SUTTON PARKE DR., \$126  13 STREET ADDRESS 13700 SUTTON PARKE DR., \$126  13 STREET ADDRESS 13700 SUTTON PARKE DR., \$126  14 CITY-SI-2P  NEWTON, PARK 100 NORTH TAMPA STREET., SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  TAMPA FL  ST BARNES, TIMOTHY R 100 NORTH TAMPA STREET, SUITE 3575  T	agent. I am familiar w	ith, and accept the obliga	ions of, Section 607.0505, Fi	iorida Sta	nute	5				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PD	SIGNATURE	Lucas de la compania del compania del la compania del compania de la compania de la compania del compania d	and title if analisable (AIO)	TE: Donistor	nd Ace	est eignature	sequired where spiralation			
PD   DELETE   11 TITLE     Change   Addition	12.				ou Apr	a t tigratore		DIRECTO	ORS IN 12	
NEWTON, ARIS 13700 SUTTON PARKE DR.,		OT TOETIO 7 TE			ITLE	~ <del>~~~</del>				
13700 SUTTON PARKE DR.,   128   13 STREET ADDRESS   14 CITY-ST-ZIP   14 CITY-ST-ZIP   14 CITY-ST-ZIP   14 CITY-ST-ZIP   14 CITY-ST-ZIP   15 CITY-ST-ZIP   15 CITY-ST-ZIP   15 CITY-ST-ZIP   16 Change   Addition   Additio		N ARIS	_							
JACKSONVILLE FL										
DELETE 21TITLE 22 NAME 22 NAME 22 NAME 23 STREET ADDRESS 23 STREET ADDRESS 24 CITY-S1-ZIP DELETE 31 TITLE 3575 TAMPA FL 38002 34 CITY-S1-ZIP DELETE 41 TITLE 35 STREET ADDRESS 34 CITY-S1-ZIP TAMPA FL 38002 34 CITY-S1-ZIP DELETE 41 TITLE 35 STREET ADDRESS 35 STREET ADDRESS 35 STREET ADDRESS 36 STREET ADDRESS 36 STREET ADDRESS 36 STREET ADDRESS 36 STREET ADDRESS 37 STREET	LACKACINELLE FI			1	.,,					
NAME STREET ADDRESS CITY-SI-ZIP TITLE D		MATILLE ! L	DELETE			11-211		Chano	e Addition	
STREET ADDRESS CITY-SI-ZIP TAMPA FL  D  WEBB, CAREY 100 NORTH TAMPA STREET, SUITE 3575 TAMPA FL 33002 STREET ADDRESS CITY-SI-ZIP  NAME BARNES, TIMOTHY R SIRREI ADDRESS CITY-SI-ZIP TILLE NAME SIRREI ADDRESS CITY-SI-ZIP TILLE SIRREI ADDRESS CITY-SI-ZIP SIRREI ADDRESS CITY	_						·			
TAMPA FL					ł					
D . DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY - ST - ZIP TITLE 3.4 CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP TITLE 3.5 STREET ADDRESS CITY - ST - ZIP 5.5 STREET ADDRESS	TANADA FI				1					
NAME   WEBB, CAREY   32 NAME   33 STREET ADDRESS   CHY-S1-ZIP   TAMPA FL 33802   34. CHY-S1-ZIP   Change   Addition   A		I L.	DELETE			21-715		Chang	e Addition	
STREET ADDRESS TAMPA FL 33802  TILLE ST BARNES, TIMOTHY R SIREEL ADDRESS TAMPA FL  100 NORTH TAMPA STREET, SUITE 3275  TAMPA FL  100 NORTH TAMPA STREET, SUITE 3275  TAMPA FL  101 NORTH TAMPA STREET, SUITE 3275  TAMPA FL  102 NORTH TAMPA STREET, SUITE 3275  TAMPA FL  103 STREET ADDRESS  CITY-ST-7IP  TILLE  STREET ADDRESS  CITY-ST-7IP  Change Addition  Addition  Addition  Addition  ADDRESS  GLEV-ST-7IP  CHANGE  ADDRESS  GLEV-ST-7IP  CHANGE  ADDRESS  GLEV-ST-7IP  CHANGE  ADDRESS  GACTIY-ST-7IP	1 -						'			
TAMPA FL 33602   3.4. CITY-ST-ZIP			LITE 9575							
TILE  ST BARNES, TIMOTHY R 1.2 NAME  STREEL ADDRESS  TAMPA FL  DELETE  1.0 NORTH TAMPA STREET, SUITE 3275  TAMPA FL  DELETE  DELETE  5.1 TITLE  5.2 NAME  5.2 NAME  5.3 STREET ADDRESS  CITY- ST- ZIP  TITLE  DELETE  DELETE  6.1 TITLE  NAME  STREEL ADDRESS  6.3 STREET ADDRESS  6.3 STREET ADDRESS  GITY- ST- ZIP  TITLE  STREET ADDRESS  6.3 STREET ADDRESS  6.4 CITY- ST- ZIP  Change  Addition  Addition  Addition  Addition  Addition										
BARNES, TIMOTHY R  100 NORTH TAMPA STREET, SUITE 3275 TAMPA FL  101 DELETE  102 DELETE  103 STREET ADDRESS  104 CITY-S1-ZIP  104 CITY-S1-ZIP  105 CITY-S1-ZIP  106 Change  Addition  107 Addition  108 Change  109 Addition		I L 00002	LIDELETE			21-51L		Chann	e Addition	
STREET ADDRESS TAMPA FL  100 NORTH TAMPA STREET, SUITE 3275 TAMPA FL  111LE  11LE						-	<u>'</u>	y		
TAMPA FL						L ADODESO				
DELETE	TANDA FI									
		rl .	Theiete			si-ZIP		Chang	e Addition	
5.3 STREET ADDRESS   5.4 CITY - ST - ZIP							'	-1 Allough	~ Lu ∧uution	
						4 Donne				
TITLE G.1 TITLE G.1 TITLE G.2 NAME  NAME  STREET ADDRESS  6.4 CITY-ST-74P										
NAME  STREET ADDRESS  6.2 NAME  6.3 STREET ADDRESS  6.4 CITY ST. 71P			T nti tre			1-ZIP		Chana	e Addition	
STREET ADDRESS 6.3 STREET ADDRESS 6.4 City, St. 7/P			ריין טנונונ					crong	- Dynamical	
C(Y, SL 7)D						1000000				
14. 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 implat report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that										
information indicated on this annual report or supplemental initial import is true and accurate and that my signature shall have the same legal effect as if made under eath; that	Cify-SI-ZiP	at the information emerical	with this filing dags not avail	6.4 (	CITY-S	in-ZIP	teted in Section 119 07(3)(i) Florida Statutas I further	certify th	at the	
Law as officer as describe of the correction of the correction of the correction as the correction as the correction of	information indicated	on this annual report or su	with this hing ages not qual applemental annual report is	true and	BCCI	urate and	that my signature shall have the same legal effect as	if made	under oath; that	
annears in Block 12 or Block 13 if changed, on an additional with an address.	I am an officer or dire	ector of the corporation or or Block 13 if channed #	the receiver or fruitee empor	wered to	өхөс	cute this r	report as required by Chapter 607, Florida Statutes; an	a that m	y name	