SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P94000029597 (9) DOCUMENT # JACK W. HUNTER, JR., P.A. Principal Place of Business Mailing Address 1980 NORTH ATLANTIC AVE. P O BOX 320568 SUITE 412 SUITE 412 COCOA BEACH FL 32931 COCOA BEACH FL 32931-0568 3. Date Incorporated or Qualified 3a. Date of Last Report 04/18/1994 05/01/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3236472 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #. etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUNTER, JACK W JR 1980 N ATLANTIC AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 412** 83 COCOA BEACH FL 32931 84 85 Zip Code City 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, 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 Statutes. SIGNATURE CALL Signature, typed or printed numer of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. Change Addition DELETE 11 THILE TITLE HUNTER, JACK W JR. 1.2 NAME NAME 1980 NORTH ATLANTIC AVE. 1.3 STREET ADDRESS STREET ADDRESS COCOA BEACH FL 32931 CiTY-ST-ZIP 14 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP Change Addition DELETE 31 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY - ST - 2IP DELETE Change TITLE 41 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - ST-ZIP CITY-ST-ZIP DELETE Change Addition 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST. 2IP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 of changed, or or an attachment with an address.

SIGNATURE: SIGNATURE AND THE GOT PRINTED NAME OF SIGNING DESICER OR DIRECTOR

8-6-96 407-868-0510

(3/36)

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