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

CORPORATION TROGER INTENTAL



FLORIDA DEPARTMENT OF STATE

## Sandra B. Morthant

## **FILED** Mar 13 1997 8:00am Secretary of State

	1997	<b>7.7</b>	cretary of State OF CORPORA		Scorciai	y or st	acc
DOCUI 1. Corporation	MENT # P94000 ASS WORKS OF FORT M		3)	Avery   Average   Alberta			1 <b>7.</b> 114 1181
Principal Place of Business 7140 N. BRENTWOOD RD FORT MYERS FL 33919 US		Mailing Address 7140 N. BRENTWOOD RD FORT MYERS FL 33919-6857 US			<b>06</b> 110 11010 10101 10100 11	188 HIH 1881	
		••			3. Date Incorporated or Qualified 04/18/1994	3a. Date of Last 05/21/1996	Report
2. Principal Pl 21	lace of Business	2a. Mailing Address			4. FEI Number 59-3154412	) <b>-</b>	Applied For Not Applicable
Suite, Apt	#, ctc.	Suite, Apt. #, etc	).		5. Certificate of Status Desired		Additional Required
22   City & State 23	0	City & State			Election Campaign Financing     Trust Fund Contribution	<b>\$5.0</b>	0 May Be d to Fees
Zip 24	Country 25	Zip (29)	30	ntry	8. This corporation has liability for i		
	9. Name and Address of Curr				10. Name and Address of New Re		
AVEAT TILADEGUD BITAD				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
FUR	I MTEHO PL 3394M			83			
			}	84 City		FL  85   Zi	p Code
11. Pursuant	to the provisions of Sections 607.09	502 and 607,1508, Florida S	Statutes, the at	xave-named corp	poration submits this statement for the p	urpose of changing	its registered
agent Ta	rn familiar with, and accept the obt	igations of, Section 607.050	5, Florida Stat	utes.	tion's board of directors. I hereby accep	3 10 1	15 Tegristored
SIGNATURE	Should be to set to another come of a professed	A and tile if applicable	(NOTE: Repistered	l Agent signature requi	ted when reinstaling?		7)
12.	OFFICERS A	ND DIRECTORS	13.	- Ingoin a gradus respons	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TIFLE	VP	DELET	E 1.1 TO	LE	111, 11	Change	Addition
NAME	HARVEY, ROBERT B		12 NA	ME			:
STREET ADDRESS	1657 S. MAYTANA RD.		1.3 51	REET ADDRESS			<b>,</b>
CITY - ST - ZIP	FORT MYERS FL	T neurs		Y-ST-ZIP		F-1-2-	— <del>— </del>
T-TLE		L DELET	1 -	ſ		Change	Addition
NAME CLUST LESSON CO.			2.2 NA	,			}
STREET ADDRESS COTY - ST- 761				REET ADDRESS TY-ST-ZIP			
TELE	P. C.	DELET		····	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			3.2 NA	ME			1
STREET ADDRESS			3.3 ST	REET ADDRESS			1
City - ST - ZiP				TY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
TIREF		L DELET		j		L Change	a [_] Addition
NAME CARELLA MARIANCO			4. 2 N	1			[
STREET ADDRESS				REET ADDRESS			}
CITY - ST - ZIP TITLE		☐ DELEY		IY-ST-ZIP		Change	Addition
NAME		Busing of to the to y	5.2 NA			,	
STREET ADDRESS				REET ADDRESS			{
CHY+S1+ZIP				TY-ST-ZIP			
TULE		DELET	E 6.1 To	LE		Change	e 🔲 Addition
NAME			6.2 NA	ME			}
STREET ADDRESS				REET ADDRESS			
14 Ldo heret	by cortifu that the inferrentian const	iorl with this filing door not		ry-ST-ZIP	d in Section 119.07(3)(i), Florida Statute	o I further continue	at the
informatio	ay cerny mar me imprination suppl or indicated on this approal report of	roo wirt tris tiling 0068 NOI	quality for trie	exemption States	d in Section 119.07(3)(I), Florida Statute t my signature shall have the same loge	s. I runner certify the	at title

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 oal Lani 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.