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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000054163 (8)

Principal Piace 8500 W HWY 20 PALATKA FL 32)	Mailing Address 6500 W HWY 20 PALATKA FL 32178			
i di Mili Mga Mari				3. Date incorporated or Qualified 07/21/1994	3a. Date of Last Report 10/14/1996
2. Principal Place of Business 2e. Mailing Address			. <u></u>	4. FEI Number	Applied For
21 26		├-¬ ~		59-3258577	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		27		5. Certificate of diagraphical	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes 🏻 No
571	9. Name and Address of Curre		1301	10. Name and Address of New Reg	
DFW	ERICA M		B1 Name		
6500 W HWY 20			82 Street Add	ress (P.O. Box Number is Not Acceptab	la\
PALATKA FL 32178			62 Street Add	ress (F.O. Box Number is Not Acceptab	ie)
4 A			83		······································
			84 City		leel 3:- 0-de
			84 City		FL 85 Zip Code
12.		gent and title if applicable. (NC ND DIRECTORS	D1E: Registered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	
TITLE	D DEW, ERICA M	☐ DETEIF	1.1 1111€		Change
NAME STREET ADDRESS	6500 W HWY 20		1.2 NAME		
CITY-ST-ZIP	PALATKA FL 32178		1.3 STREET ADDRESS		
TITLE	INDAMA IL OZITO	☐ DELETE	1.4 CITY-ST-ZIP 21 TITLE		Change Additio
NAME			2.2 NAME		
STREET 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		•
CITY-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 TITLE	,	DELETE	4.4 CITY-ST-ZIP		Change Addition
NAME		L) DIECTE	5.1 TITLE 5.2 NAME		in change in Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-7IP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	P '		6.3 STREET ADDRESS	•	
CITY-ST-ZIP	\$ 1.00 miles		6.4 CITY-S1-ZIP		
44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Of the state of the state of	4 10 41 50 1			

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 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 13 if changed, or on aprattachment with an address.

Erica M. Dew

4-04-97

904-328-9686

FILED

Apr 16 1997 8:00am

Secretary of State