

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000058003 (2)

1. Corporation Name

ALISON ASSOCIATES, INC.

Principal Place of Business

1111 SOUTH FEDERAL HWY. S-330
STUART FL 34994

Mailing Address

1111 SOUTH FEDERAL HWY. S-330
STUART FL 34994-3839

FILED
May 09 1997 8:00am
Secretary of State



2. Principal Place of Business

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2a. Mailing Address

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Suite, Apt. #, etc.

Suite, Apt. #, etc.

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City & State

City & State

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Zip

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Country

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3. Date Incorporated or Qualified

08/05/1994

3a. Date of Last Report

08/13/1996

4. FEI Number

59-3258421

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

COVEY, JAMES P
664 AZALEA LANE, SUITE B
VERO BEACH FL 32983

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COVEY, JAMES P		
STREET ADDRESS	759 SOUTH FEDERAL HIGHWAY STE. 314		
CITY-ST-ZIP	STUART FL		
TITLE	D	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEELE, RUSSELL B JR		
STREET ADDRESS	3531 SW CORPORATE PKWY		
CITY-ST-ZIP	PALM CITY FL		
TITLE	D	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENNETT, CHRISTOPHER		
STREET ADDRESS	3531 SW CORPORATE PKWY		
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