## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham : • Secretary of State

.,	1996	DIVISION OF	CORPORATIONS					
1. Corporation	i Name	00066074 (	•					
NATIO	onwide settlement op	TIONS CORPORATION	l					
Principal Place	of Business	Mailing Address			UR OUN DING ON	FUAL U		
·		1831 NW 13TH ST						
1831 NW 13TH ST 1831 NW 13TH ST SUITE 4								
GAINESVILLE FL 32609 GAINESVILLE FL 32600		09	3. Date Incorporated or Qualified	3a. Date of	Last R	enort	1	
				09/02/1994		/24/1	•	
2. Principal Pla		2a. Mailing Address		4. FEI Number			Applied For	
21 711 NV		26		59-3276025			Not Applicable	$\Box$
Suite Apt 1	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	; cj		Additional Required	
Oty & State	/ C	City & State	<del></del>	6. Election Campaign Financing			<b>0</b> Мау Ве	-
23 601 INE		28		Trust Fund Contribution	[]		d to Fees	
24 3260	9 ZS USA	Zip	Country	8. This corporation has liability for		nder s	199.032,	
24 3200	9. Name and Address of Currer	29 29 Anent	30	Florida Statutes  Yes	[]No	ni .		_
	g, manife and readings of Carlo	Trogistered Addin	B1 Name	11111 11 12 1-	1081910100 ABI	,,,,		$\dashv$
KING	BEVERLY A		82 Street	Address (P.O. Box Number is Not Acceptate	20			_
	W 23RD AVENUE		51 Street 7/1	NW 23rd Ave,	Cuite 4	ŀ		
SUITE			83		P			7
GAINE	SVILLE FL 32609		84 Cite			35 Zıç	Code	$\dashv$
			<u>                                     </u>	aines ville	PL	3	21004	
or registere	ed agent, or both, in the State of Flori	da. Such change was authorize	ed by the corporation's	orporation submits this statement for the pu board of directors. I hereby accept the app	rpose of changi ointment as reg	ng its ri jistered	egistered offici agent. I am	a
	h, and accept the obligations of Sect	tion 607,0505, Florida Statutes		11/2/	96			
SIGNATURE 4	Signature, typed or printed name of registered agent	t and title applicable (NO	TE Registered Agent signature	required when reinstating	DATE	<u></u>		
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	<del></del>	·		CR2E034 (12/95)
TITLE	D	<b>₹</b> DEI,ETE	1. 1 TITLE	President / Director		Change	Addition	<del>=</del>
NAME Profest Leading	KING, BEVERLY A		1.2 NAME	William H. King 711 NW 23 M AV, Suite	ļ			8
STREET ADDRESS CITY+ST+ZIP	1831 NW 13TH ST GAINESVILLE FL 32609		1.3 STREET ADDRESS	Gainesville, FL 326				띯
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NAME			6.2 NAME		_/L	แตเปร	☐ vonition	
STREET ADDRESS			6.3 STREET ADDRESS		· / #		× ~	
C/TY-ST-Z/P			64 CITY-ST-ZIP	Dank depres	# HP C	20	0,00	
	certify that the information supplied	with this filing is voluntarily furni		alify for the exemption stated in Section 119	.07(3)(k), Florida	Statute	es. I further	ヿ

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 an attachment with an address.

SIGNATURE: SIGNATURE AND TYPE POR PRINTED

4 2 96 904 - 336-8314