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

FILED May 08 1997 8:00am Secretary of State

·	GRAHAM, INC.	Με 305	Marling Address 305 KEYSTONE ROAD AUBURNDALE FL 33823-2343								
							Date Incorporated or Qualifie 9/19/1994		Pate of Last /23/1996	Report	
2. Principal I	Place of Business	26.	Mailing Address	· · · · · · · · · · · · · · · · · · ·		4. F	El Number			Applied For	
21		26		,			59-3278549			lot Applicable	
Suite, Apt	#, etc.	27	Suite, Apt. #, etc			5. 0	Certificate of Status Desired			Additional Required	
City & Sta	Ic		City & State		.,,,,,	6. E	lection Campaign Financing			May Be	
23]		28	······································				rust Fund Contribution		Added	to Fees	
Zip ∷1	Country		Zip	⊢ ¬	untry		his corporation has liability to		e tax under No	s. 199.032,	
24	9. Name and Address of	29 29 Current Regis	tered Agent	30	<u> </u>		florida Statutes Name and Address of New				
SIM	IS, DAVID A				81 Name					***************************************	
305	KEYSTONE ROAD				82 Street A	Address (P.0	D. Box Number is Not Accep	otable)			
AUE	Burndale FL 33823				83						
					63						
					64 City			FI	85 Zig	Code	
office or	registered agent, or both, in am familiar with, and accept.	the State of Floric	ta. Such change wa	s authorize	ed by the corp	oration's bo	ard of directors. I hereby ac	cept the ap	pointment a	is registered	
SIGNATURE	Sign iting, typed or pooled name of re				itutes.		submits this statement for the eard of directors. I hereby actions sinstating)	DATE			
SIGNATURE	Sign it are typed or printed name of re OFFIC		il applicable. (N	OTE: Register	ed Agent signature	required when to		DATE	ID DIRECTO	DRS IN 12	
SIGNATURE 12. TOLE	Sign dura Syleid or protein name of re OFFIC	egislered agent and title	il applicable. (N	OTE: Register 13.	ed Agent signalure	required when to	einstating)	DATE		PRS IN 12	
SIGNATURE 12. TOLE NAME	Sign dura byted or profest name of the OFFIC SIMS, DAVID A	egistered agent and title CERS AND DIREC	il applicable. (N	OTE: Register 13. 1.11	ed Agent signature	required when to	einstating)	DATE	ID DIRECTO	DRS IN 12	
SIGNATURE 12. TILE NAME STREET ADDRESS	Sign dure, typed or profed name of the OFFIC D SIMS, DAVID A	egintered agent and title CERS AND DIREC	il applicable. (N	OTE: Register 13. 1.11 1.21 1.35	ed Agent signalure	required when to	einstating)	DATE	ID DIRECTO	DRS IN 12	
SIGNATURE 12. TILE NAME STREET ADDRESS CHY-ST-ZIP	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382	egintered agent and title CERS AND DIREC	il applicable. (N	OTE: Register 13. 1.11 1.21 1.33	ed Agent signature ITLE VAME STREET ADDRESS	required when to	einstating)	DATE	ID DIRECTO	DRS IN 12	
SIGNATURE 112. TITLE NAME STREET ADDRESS CUY-ST-ZIP TITLE NAME	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S	ngistered agent and file CERS AND DIREC	II applicable (N CTORS DELETE	DTE: Register 13. 1.13 1.21 1.33 1.44 2.13	ed Agent signature UTILE VAME STREET ADDRESS CITY-ST-ZIP UTILE VAME	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	DRS IN 12	
SIGNATURE 11. 11. 11. 11. 11. 11. 11. 1	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO	ngistered agent and title CERS AND DIREC 1 23	II applicable (N CTORS DELETE	OTE: Register 13. 1.13 121 1.33 1.41 2.1 2.21	ed Agent eignalure ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE	D DIRECTO	DRS IN 12	
SIGNATURE 12. THE NAME SIREET ADDRESS CHY-ST-ZIP NAME STREET ADDRESS CHY-ST-ZIP	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S	ngistered agent and title CERS AND DIREC 1 23	II applicable (N CTORS DELETE	OTE: Register 13. 1.13 1.21 1.33 1.44 2.1 2.21 2.33 2.4	ed Agent signature UTILE VAME STREET ADDRESS CITY-ST-ZIP UTILE VAME	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	PRS IN 12 Addition	
SIGNATURE 12. TOLE NAME SIREET ADDRESS CHY-ST-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP THLE	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T	rigistered agent and file CERS AND DIREC 23 DURT 23	II applicable (NOTORS DELETE	OTE: Register 13. 1.11 1.21 1.31 1.44 2.11 2.21 2.33 2.44 3.11	ed Agent eignalure ITILE VAME STREET ADDRESS CITY-ST-ZIP VAME STREET ADDRESS CITY-ST-ZIP	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	PRS IN 12 Addition	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO	rigistered agent and file CERS AND DIRECT 23 DURT 23	II applicable (NOTORS DELETE	OTE Register 13. 1.1. 1.2. 1.3. 1.44 2.1. 2.2. 2.3. 2.4 3.1. 3.2. 3.3.	ed Agent eignature IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	PRS IN 12 Addition	
SIGNATURE 12. TILE NAME SIREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T	rigistered agent and file CERS AND DIRECT 23 DURT 23	II applicable (N CTORS DELETE DELETE	OTE Register 13. 1.13 1.21 1.33 1.44 2.11 2.21 2.33 2.4 3.11 3.21 3.34	ed Agent eignature IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME CONTROL OF THE PROPERTY ADDRESS CITY-ST-ZIP	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change	PRS IN 12 Addition Addition	
SIGNATURE 12. TOLE NAME SIREE LADDRESS CHY-ST-ZIP TITLE NAME SIREE LADDRESS CHY-ST-ZIP TITLE NAME SIREL LADDRESS CHY-ST-ZIP TITLE	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO	rigistered agent and file CERS AND DIRECT 23 DURT 23	II applicable (NOTORS DELETE	07E Register 13. 1.11 1.21 1.33 1.44 2.11 2.21 2.33 2.4 3.11 3.21 3.34 4.1	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	PRS IN 12 Addition Addition	
SIGNATURE 12. TILE NAME SIREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II applicable (N CTORS DELETE DELETE	OTE Register 13. 1.11 1.21 1.33 1.44 2.11 2.21 2.33 2.4 3.11 3.21 3.34 4.1	ed Agent eignature IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME STREET ADDRESS CITY-ST-ZIP IIILE VAME CONTROL OF THE PROPERTY ADDRESS CITY-ST-ZIP	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change	PRS IN 12 Addition Addition	
SIGNATURE 12. TOLE NAME STREET ADDRESS COLY-ST-ZIP TIFLE NAME STREET ADDRESS COLY-ST-ZIP TIFLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II appicable (N CTORS DELETE DELETE DELETE	07E Register 13. 1.1. 1.2. 1.3. 1.44 2.1 2.2. 2.3. 2.4 3.1 3.2. 4.1 4.1 4.2 4.3.	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME VAME VAME VAME VAME VAME VAME VA	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change Change	PRS IN 12 Addition Addition Addition	
SIGNATURE 12. TOLE NAME STREET ADDRESS COLY-ST-ZIP TIFLE	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II applicable (N CTORS DELETE DELETE	07E Register 13. 1.1. 1.2. 1.3. 1.44 2.1 2.2. 2.3. 2.4 3.1 3.2. 4.1 4.2 4.3. 4.4 5.1	and Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change	PRS IN 12 Addition Addition Addition	
SIGNATURE 12. TOLE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II appicable (N CTORS DELETE DELETE DELETE	OTE Register 13. 1.11 1.21 1.33 1.44 2.11 2.21 2.33 2.4 3.11 3.21 4.31 4.2 4.33 4.41 5.1 5.2	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME VAME VAME VAME VAME VAME	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change Change	PRS IN 12 Addition Addition Addition	
SIGNATURE 12. TOLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II appicable (N CTORS DELETE DELETE DELETE	07E Register 13. 1.1: 1.2: 1.3: 1.44 2.1: 2.2: 2.3: 2.4 3.1: 3.2: 4.1: 4.2: 4.3: 4.1: 5.1: 5.2: 5.3:	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS STREET ADDRESS	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change Change	PRS IN 12 Addition Addition Addition	
SIGNATURE 12. TOLE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II appicable (N CTORS DELETE DELETE DELETE	OTE Register 13. 1.1. 1.2. 1.3. 1.4. 2.1. 2.2. 2.3. 2.4. 3.1. 3.2. 4.1. 4.2. 4.3. 4.1. 5.1. 5.2. 5.3.	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME VAME VAME VAME VAME VAME	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change Change	PRS IN 12 Addition Addition Addition	
SIGNATURE 12. TOLE NAME STREET ADDRESS COLY-ST-ZIP	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II appicable. (N CTORS DELETE DELETE DELETE DELETE	07E Register 13. 1.1: 1.2: 1.3: 1.4: 2.1: 2.3: 2.4: 3.1: 3.2: 4.1: 4.2: 4.3: 4.1: 5.1: 5.2: 5.3: 6.1:	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition	
SIGNATURE 12. TOLE NAME SIREELADDRESS CHY-ST-ZIP HILE NAME STREELADDRESS CHY-ST-ZIP HILE NAME STREELADDRESS CHY-ST-ZIP TITLE	D SIMS, DAVID A 305 KEYSTONE ROAD AUBURNDALE FL 3382 D GRAHAM, TRACY S 1315 ARROWHEAD CO AUBURNDALE FL 3382 D GRAHAM, GERALD T 1315 ARROWHEAD CO AUBURNDALE FL 3382	rigistered agent and file CERS AND DIRECT 23 DURT 23	II appicable. (N CTORS DELETE DELETE DELETE DELETE	OTE Register 13. 1.1: 1.2: 1.3: 1.4: 2.1: 2.3: 2.4: 3.1: 3.2: 3.3: 3.4. 4.1: 4.2: 4.3: 5.1: 5.2: 5.3: 5.4. 6.1: 6.2:	ed Agent eignature ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE	required when to	oinstating) DDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition	

I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, or on an attraction with an address.