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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secreta			tary of State CORPORATIONS	Secretary	Secretary of State	
DOCU 1. Corporation WARK/	×1,1401110	00085058 (3))			
Principal Plac	ce of Business	Mailing Address				
2301 PARK AVENUE 2301 PARK AVENUE 8UITE 402 SUITE 402 ORANGE PARK FL 32073 ORANGE PARK FL 3:			73	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 11/17/1994	ļ	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26	· · · · · · · · · · · · · · · · · · ·	59-3283344	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	to	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip 24	Country	Zip	Country	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No	
[24]	25 9. Name and Address of Cur	29 rent Registered Agent	30	10. Name and Address of New Register		
DU	JVAL, STEPHEN		81 Name			
2301 PARK AVENUE			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
SUITE 402						
Į OF	RANGE PARK FL 32073		83			
i			B4 City		85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	utes, the above-named co	progration submits this statement for the purpos	e of changing its registered	
office or r agent. I a	rogistered agent, or both, in the St am familiar with, and accept the ob	ale of Horida. Such change was digations of, Section 607.0505, F	authorized by the corpor lorida Statutes.	ation's board of directors. I hereby accept the	appointment as registered	
SIGNATURE						
12,	Signature, typed or printed name of registered	agent and title if applicable [NC] AND DIRECTORS	OTE: Registered Agent signature req	nuired when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A		
TITLE	S OFFICERS.	DELETE	1,1 1174.6	ADDITIONS/CHANGES TO OFFICERS A	Change Addition	
NAME	PETER G. HUNDT		1.2 NAME			
STREET ADDRESS	3616 MAGNOLIA POINT BI	LVO.	1.3 STREET ADDRESS			
CITY-ST-ZIP	GREEN COVE SPRINGS FI	L	1.4 CITY - ST- ZIP			
TITLE	0	DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS	% 2301 PARK AENUE SUI ORANGE PARK FL	IE 402	2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	UNANUE FAMA FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
NAME		part because	3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TO LE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition	
NAME		E DICCIE	5.1 THEE 5.2 NAME		El Amailde El Madition	
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TO LE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

CITY-ST-ZIP

14. I 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 eath; 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 changid, or or an attachment with an address.

Feb 18 1998 8:00am