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

PROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

	1997	DIVISION OF C	ORPORATIONS	Secreta	ry of State
	MENT # P9400( BY NECO, INC.	0093712 (5)			
					<b>  10                                 </b>
Principal Plac	e of Business	Mailing Address			10140
3333 N. MAIN ST		3201 SE 28TH AVENUE			
PAUL WEST F		3201 S.E. 28TH AVENUE GAINESVILLE FL 32641-939	27		
US		US	•	3. Date Incorporated or Qualified	3a. Date of Last Report
A Delegional D				12/27/1994 4. FEL Number	05/31/1996
2. Principal Place of Business		2a. Mailing Address 26		59-3285708	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	ė	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
<b>23</b> Zip	Country	<b>[28]</b> Zip	Country	Trust Fund Contribution  8. This corporation has liability for in	
24	25	29	30	Florida Statutes	Yes 🗌 No
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Reg	Istered Agent
HARRIS, KAREN D			81 Name		
3201 S.E. 28TH AVENUE			82 Street Add	lress (P.O. Box Number is Not Acceptable	e)
GAI	NESVILLE FL 32601		63		
			84 City		85 Zip Code
					FL     '
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statute : of Florida   Such change was a	s, the above-named cor uthorized by the corpora	poration submits this statement for the pa ation's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
agent. I a	m familiar with, and accept the oblig	jations of, Section 607.0505, Flo	rida Statutes.	, i	
SIGNATURE	Signature, typical or printed name of registerest agr	ent and title if appoinable (NOTE	Registered Agent signature requ	lired which reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	1171314	·	Change Addition
NAME	HARRIS, KAREN D		1.2 NAME	734 NE 2 NO STREE	<b>~</b>
STREET ADDRESS CITY-ST-ZIP	3201 S.E. 28TH AVENUE GAINESVILLE FL 32601		1.3 STREET ADDRESS	134 NE DIE	· •
TITLE	0	DELETE	2.1 TITLE		Change Addition
NAME	EWARD, MARY J		2.2 NAME		
STREET ADDRESS	3201 S.E. 28TH AVENUE		2.3 STREET ADDRESS	134 NE 2ml STREE	<i>T</i>
CITY-ST-ZIP	GAINESVILLE FL 32601	The files	2 4 CITY - S1 - ZIP		
TITLE NAME		☐ DELETE	3.1 THE 3.2 NAME 1		☐ Change ☐ Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - 7IP		
TITLE		DECETÉ	4.1 1111.1		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CHY - S1 - ZIP 5.1 THUE		Change Addition
NAME			5.2 NAMI		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 C(1) - S1 - Z(f)		
TITLE		[_] DELETE	6.1 1HLf		☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - S1 - 712		
44 Lela haral	ov porting that the information of male	d with the films done not qualify	tor the everytion state	d in Section 119 07/3(t) Florida Statutos	Liferther cortife that the

I do heroby 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 13 if changed, or on an attachment with an address.

352-376-537/

Mar 17 1997 8:00am