21 26 P O Box 969 59-3286637 N Suite, Apt. #, etc. 22 5 Certificate of Status Desired 58.75 Fee R City & State 6 City & State 7 Zip Country 7 25 29 34688-0969 30 USA 7 9. Name and Address of Current Registered Agent 7 CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301 7 26 P O Box 969 59-3286637 N Suite, Apt. #, etc. 7					RTMENT OF STATE	FLORIDA DEPART Sandra B. Secretary	ING FEE AFTI	PROFIT PORATION IAL REPORT 1996	CORE ANNU	₹
TOS-C LIVE CORN TARPON SPRINGS FI, 34689 TOS-C LIVE OAK TARPON SPRINGS FI, 34689 2. Principal Pade of Business 2. Such Apt. 4, etc. 2. Principal Pade of Business 2. Such Apt. 4, etc. 2. Principal Pade of Business 2. Such Apt. 4, etc. 2. Principal Pade of Business 2. Such Apt. 4, etc. 2. Country 2. Country 2. Taryon Springs FIL 85 174 2. Taryon Springs FIL 85 175 2.)(((()			2303 (2)		Name	Corporation	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3286637 5. Certificate of Status Desired 58-056 59-3286637 59-328667 59-328667 59-328667 59-328667 59-328667 59-328667 59-3				-		05-C LIVE OAK	7	DAK	05-C LIVE O	7
2. Principal Place of Business 2e. Mailing Address 5. Certificate of Status Desired 59 - 3286637 5. Suite. Apt. #, etc. 50 - 3286637 5. Suite. Apt. #, etc. 5. Certificate of Status Desired 58.75 5e. R. City & State 22 Tarpon Springs FL 6. Section Compagin Finencing Address	Report	e of Last Re	Qualified 3a. Dat		4689	arpon springs fl 34	•	RINGS FL 34689	TARPON SPR	1
Sure, Apt. 4, etc. Sure, Apt. 4, etc. Sure, Ap	Applied For	T A				Mailing Address	28.	ace of Business	Principal Pla	2. 1
Colly & State Colly & Stat	Not Applicable		7	59-3286637	69		26			
City & State 28 29 20 20 20 20 20 20 20 20 20	5 Additional Required	•	Desired	5. Certificate of Status Desired		Suite, Apt. #, etc.	27	t, etc.	Suite, Apt. #	
Zep	00 May Be		~ r~	, , ,		•			City & State	
PARTICLE STATE ADDRESS OF TARPON SPRINGS FL 34689 28 34688-0969 30 USA Florida Statutes Tree No Name and Address of New Registered Agent 10. Name and Address 10. Name and Address	ed to Fees		on					Countr		
CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301 84 City Tallahassee FL 32301 84 City Tallahassee FL 32301 85 City Tallahassee FL 32301 86 City Tallahassee FL 32301 87 City Tallahassee FL 32301 88 City Tallahassee FL 32301 89 City Tallahassee FL 32301 89 City Tallahassee FL 32301 80	, 199.002,	ax under s			——	· ·	· · · · · · · · · · · · · · · · · · ·	h		
CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301 82 Street Address [P.O. Box Numbrier is Not Acceptable] 83 N. Ring Ave, Ste 400 84 City Tarpon Springs FL 85 Zpp Tarpon Springs FL 86 Zpp Tarpon Springs FL 86 Zpp Tarpon Springs FL 85 Zpp Tarpon Springs FL 86 Zpp Tarpon Springs FL		Agent	of New Registered	10. Name and Address of New	R1 Nano	ered Agent	dress of Current Regist	9. Name and Addre		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Orida 2 and 5, the above named corporation submits this statement for the purpose of changing its recorded agent, or both, in the State of Florida. Such change was uthorized the corporation submits this statement for the purpose of changing its recordant of directors. Thereby accept the appropriated agent with, and accept the obligations of, Section 607.0505, Florida 2 and submits the corporation submits this statement for the purpose of changing its recordant of directors. Thereby accept the appropriate target statement of engineering agent of the corporation is board of directors. Thereby accept the appropriate target statement of engineering agent of the corporation is board of directors. Thereby accept the appropriate target statement of engineering agent of the corporation submits this statement for the purpose of changing its recordant agent of the corporation submits this statement for the purpose of changing its recordant agent of the corporation submits this statement for the purpose of changing its recordant agent of the corporation submits this statement for the purpose of changing its recordant agent of the corporation submits this statement for the purpose of changing its recordant agent of the corporation submits this statement for the purpose of changing its recordant agent of directors. The corporation submits this statement for the purpose of changing its recordant agent of directors. The corporation is board of directors. Thereby accept the appropriate of the corporation submits this statement for the purpose of changing its recordant agent	Law	y at]	, Attorne	eorge Klimis, At	93 Chroat Add		COMPANY	RATION SERVICE C	CORPOR	
B4 City Tarpon Springs FL 85 34								AYS ST.	1201 HA	
Tarpon Springs					83			ASSEE FL 32301	TALLAH	
11. Pursuant to the provisions of Sections 607, 0502, and 607, 1508, and 607, 150	rip Code 4689	85 ZIP	FI	n Snringe	84 City	_				
SIGNATURE GEORGE KLIMIS Signature special or critical special special or critical special special or critical special special or critical special	registered offic	anging its re	for the purpose of ch	ation submits this statement for the p	s, the above-named corporation's boa	.1508, Norida Sateles,	ections 607.0502 and 607	o the provisions of Section	. Pursuant to	11.
12. OF ROERS AND DIRECTORS ITTLE NAME LAMBORN, USANEE 7705-C LIVE OAK CITY-SI-ZIP TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 THEE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP DELETE ALTITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE DELETE SLEETE SLEETE SLEETE CHANGE SLEETE CHANGE SLEETE CHANGE CH	a agent. Fam	s legislered i	116/9	a or directors. Prioroby accept the ap		1505, Fior a Statut s	ligations of, Section 607.0	h, and accept the obliga	familiar with	
12. OFFICERS AND DIRECTORS ITLE NAME LAMBORN, USANEE 7705-C LIVE OAK CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE A4 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE TITLE CITY-ST-ZIP TITLE T			<i>7 4 </i>	when reinstating!	Picg stered Agent signature requir	s dicay. (NOTE:	JIMIS me of registered agent and trice? a	GEORGE KLI Signature typed or profesionance	BNATURE	SIG
NAME LAMBORN, USANEE 12 NAME 13 STHEET ADDRESS 14 CHY-ST-ZIP TARPON SPRINGS FL 34689 14 CHY-ST-ZIP TITLE DELETE 2 1 TITLE 2 NAME 22 NAME 23 STHEET ADDRESS 24 CHY-ST-ZIP TITLE DELETE 31 TITLE 31 TITLE 32 NAME 33 STHEET ADDRESS 34 CHY-ST-ZIP TITLE DELETE 41 TITLE DELETE 42 NAME 33 STHEET ADDRESS 34 CHY-ST-ZIP TITLE DELETE 44 TITLE DELETE 43 STHEET ADDRESS CHY-ST-ZIP TITLE DELETE 44 NAME 42 NAME 43 STREET ADDRESS CHY-ST-ZIP TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE Change		·	S TO OFFICERS AN	ADDITIONS/CHANGES TO OF		rg/is	OFFICERS AND DIREC	(12.
TREET ADDRESS TOS-C LIVE OAK TARPON SPRINGS FL 34689	☐ Addition	∐ Change				LI TELETE	ANEC	U LAMBODN LISAN		
TARPON SPRINGS FL 34689										
TITLE										
STREET ADDRESS 2 3 STREET ADDRESS 1042 Deal Lane	X Addition	Change		resident		DELETE.				
CHY-ST-ZIP			zelbaker	uzanne U. Hazelb	2.2 NAME				AE.	NAM
TITLE					2.3 STREET ADDRESS 1 1					
NAME STREET ADDRESS CHY-ST-ZIP 3.4 CHY-ST-ZIP 11/LE □ DELETE 4.1 THLE 1.2 NAME STREET ADDRESS CHY-ST-ZIP 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CHY-ST-ZIP 11/LE □ DELETE 5.1 THLE NAME NAME STREET ADDRESS 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP 11/LE □ DELETE 5.1 THLE NAME 1.5 NAME		Chance	ፈ 691							
STREET ADDRESS 33 STREET ADDRESS 34 CITY - ST - ZIP 34 CITY - ST - ZIP 111LE Change CITY - ST - ZIP Change CITY - ST - ZIP Change Chan	[] Addison			oliday FL 34691	2.4 CHTY - ST - ZIP	[] DELETE			r-ST-ZIP	CITY
CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE □ DELETE 4.1 TITLE □ Change NAME 4.2 NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE □ DELETE 5.1 TITLE □ Change NAME 5.2 NAME □ Change	Addition	Onlings		oliday FL 34691	2 4 CHY-ST-ZIP T 3 1 TITLE	DELFTE			(-ST-ZIP .F	CHTY
ITILE DELETE 4.1 TITLE Change NAME 4.2 NAME 4.3 STREET ADDRESS DTY-S1-ZIP 4.4 CITY-S1-ZIP TITLE Change NAME 5.1 TITLE Change NAME 5.2 NAME Change	Addition	Onlings		oliday_FL34691	2 4 C(IY - SI - ZIP] 3 1 TILE 3.2 NAME	☐ DELFTE	manus augustus (s. s. s	16	Y - ST - ZIP IF NE	CITY TITLI NAM
STREET ADDRESS 4.3 STREET ADDRESS DTY-S1-ZIP 4.4 CITY-S1-ZIP TITLE DELETE 5.1 TITLE Change NAME 5.2 NAME Change	Addition			oliday_FL34691	2 4 CITY - ST-ZIP 3 1 TITLE 3.2 NAME 3 3 STREET ADDRESS	DELFIE			Y-ST-ZIP .e Me Eet address	CITY TITLE NAM STRE
City+St-ZiP 4.4 City+St-ZiP TitLE □ DELETE 5.1 Title □ Change NAME 5.2 NAME □ Change	W M M/ M M M M M M M M M M M M M M M M M			oliday_FL34691	2 4 CITY - ST-ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST-ZIP				r-St-ZIP .e Me Eet address r-St-ZIP	CHY TITLI NAM STRE CHY
TITLE DELETE 5.1 TITLE Change NAME 5.2 NAME	W M M/ M M M M M M M M M M M M M M M M M			oliday_FL34691	2 4 CITY - ST-ZIP 3 1 TILLE 3 2 NAME 3 3 STREET ADDRESS 3.4 CITY - ST-ZIP 4.1 TILLE				(-ST-ZIP E AE EET ADDRESS (-ST-ZIP E	CHY TITLI NAM STRE CHY
NAME 5.2 NAME	W M M/ M M M M M M M M M M M M M M M M M			oliday_FL34691	2 4 CHY-SI-ZIP 3 1 THE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-SI-ZIP 4.1 THE 4.2 NAME 4.3 STREET ADDRESS				Y-ST-ZIP F FET ADDRESS Y-ST-ZIP F AE EET ADDRESS	CHY TITLE NAME STREE CHY TITLE NAME STREE
	☐ Addilion	Change		oliday FL 34691	2 4 City-St-ZiP 3 1 Title 3 2 NAME 3 3 STREET ADDRESS 3 4 City-St-ZiP 4. 1 Title 4.2 NAME 4.3 STREET ADDRESS 4.4 City-St-ZiP	☐ D€L€TE			Y-ST-ZIP F EET ADDRESS Y-ST-ZIP F AE EET ADDRESS Y-ST-ZIP	CHY TITLI NAM STRE CHY TITLI NAM STRE CHY
1 33 SINCE MODICOS	☐ Addilion	Change		oliday_FL_34691	2 4 City-St-ZiP 3 1 Title 3.2 NAME 3.3 STREET ADORESS 3.4 City-St-ZiP 4.1 Title 4.2 NAME 4.3 STREET ADDRESS 4.4 City-St-ZiP 5.1 Title	☐ D€L€TE			F-ST-ZIP EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E EET ADDRESS F-ST-ZIP E	CHY TITLE NAM STRE CHY TITLE NAM STRE CHY TITLE TITLE TITLE
DTY - ST - ZIP 5.4 CTY - ST - ZIP	☐ Addilion	Change		oliday FL 34691	2 4 City - St - ZiP 3 1 TILE 3.2 NAME 3.3 STREET ADORESS 3.4 City - St - ZiP 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZiP 5.1 TITLE 5.2 NAME	☐ D€L€TE			F-ST-ZIP EET ADDRESS F-ST-ZIP F ME EET ADDRESS F-ST-ZIP EET ADDRESS F-ST-ZIP EET ADDRESS F-ST-ZIP E	CHY TITLE NAM STRE CHY TITLE NAM STRE CHY TITLE NAM
	☐ Addilion	Change		oliday_FL_34691	2 4 CITY-ST-ZIP 3 1 TILE 3.2 NAME 3 3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	☐ D€L€TE			F-ST-ZIP EET ADDRESS F-ST-ZIP AE EET ADDRESS F-ST-ZIP EET ADDRESS F-ST-ZIP E AE EET ADDRESS	CITY TITLE NAMM STRE CITY TITLE NAMM STRE CITY TITLE NAMM STRE
NAME 6.2 NAME	☐ Addition	Change		oliday FL 34691	2 4 CITY-ST-ZIP 3 1 TILE 3.2 NAME 3 3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ DELETE			F-ST-ZIP EET ADDRESS F-ST-ZIP EET ADDRESS F-ST-ZIP EET ADDRESS F-ST-ZIP E AE EET ADDRESS F-ST-ZIP	CHY TITLE NAM STRE CHY TITLE NAM STRE CHY TITLE NAM STRE CHY CHY CHY CHY
STREET ADDRESS 6.3 STREET ADDRESS OF THE STREET ADDRESS	☐ Addition	Change		oliday_FL_34691	2 4 CHY-SI-ZIP 3 1 THE 3.2 NAME 3.3 STREET ADDRESS 3.4 CHY-SI-ZIP 4.1 THLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-SI-ZIP 5.1 THLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CHY-SI-ZIP 6.1 THLE	☐ DELETE			Y-ST-ZIP EET ADDRESS Y-ST-ZIP AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS F-ST-ZIP E	CHY TITLE NAM STRE CHY TITLE NAM STRE CHY TITLE NAM STRE CHY TITLE TITLE TITLE TITLE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 certify that I am an officer or director of the corporation or the receiver or trustee enipowered 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:

SUZANNE U. HAZELBAKER, PRES. 4/23/96

SYNATURE AND TYPED OR PRINTER NAME OF SIGNING OFFICER OR DIRECTOR