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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra 8 Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000021801	(2)

rincipal Place of Business	Mailing Address				
4584 BARDSDALE DRIVE	4584 BARDSDALE DRIVE				
PALM HARBOR FL 34685	PALM HARBOR FL 34685				

4564 BARDSDALE DRIVE PALM HARBOR FL 34685		PALM HARBOR FL 34685			14. 5	02.5	and	
					3. Date Incorporated or Qualified 03/16/1995	3a. Date of	one	
2. Principal Plac	ne of Business	2a. Mailing Address			4. FEI Number		Ar	optied For
2. Philopar Flac 1 4584	Bardsdale Dr.	26 4584 Bardsdale Dr			59-3304272			ot Applicable
Suite, Apt. #.		Suite, Apt. #, etc.			5. Certificate of Status Desired	Ø		Additional equired
2		City & State			6. Election Campaign Financing		\$5.00	May Be
Oity & State Palm	Harbor, Fl.	28 Palm Ha	rbor,	F1.	Trust Fund Contribution			to Fees
Zιρ	Country	^{Zip} 34685	Country	ellas	8. This corporation has liability for	intang ble tax t • 🕡 No	unders 1	199.032,
34685	5 25 Pinellas	40	30 111		Florida Statutes L) Yes 10. Name and Address of New F		nent	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New /	iograterou Aş	10.11	
SPENCE, MARK A			82	Street Addr	ress (P.O. Box Number is Not Acceptal	nie)		
	IDISON STREET		. 83					
NEW PU	PRT RICHEY FL 34652						85 Zip	Code
			84	,	ration submits this statement for the pa and of directors. Thereby accept the app	FL		
	Styratine typotics partial cand of registers traject.		NOTE Regelect Ag	of signature require	ADDITIONS CHANGES TO OF	DATE FICERS AND [DIRECTO	RS IN 12
12.	OFFICERS AND	DELETE	1 1 Tifus				Change	Addition
TITLE	VEDUNE LITTUED E	Clottere	1.2 NAM:					
NAME	VERHINE, LUTHER E 4584 BARDSDALE DRIVE			ET ADDRESS				
STREET ADDRESS	PALM HARBOR FL 34685		1.4 CITY					
CITY-ST-ZIP TITLE	D	∑ DELETE	2 1 HIL] Change	☐ Addition
NAME	DAVIS, PAUL A		2.2 NAM	<u>.</u>				
STREET ADDRESS	12350 DOVER AVE		23 STRE	ET ADDRESS				
CITY - ST - ZIP	NEW PORT RICHEY FL 3465	4	2 4 CHTY				1 Change	Addition
TITLE		☐ D€LETE	3 1 TIU 3 2 NAM			L.	, a.	_
NAME				ET ADDRESS				
STREET ADDRESS			l.	- Si - ZiP				
CITY - ST - ZIP		□ D€LETE	4. 1 THL] Change	Addition
NAME			4.2 NAM	i				
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CITY-ST-2IP				SI-7/2] Change	Addition
TITLE		☐ DELETE	5 1 117.			Ĺ.	J -0	
NAME			5.2 NAN	l l				
STREET ADDRESS				EEL ADDRESS ST-ZiP				
CITY-ST-ZIP		DELETE	6 1 N			C	Change	Additio
TITLE			6 2 NAM					
NAME			1	EET ADDRESS				
STREET ADDRESS			6.4.017	r - ST - 7iP				dan I further
4 1 1 (Y + N I - Z I F	4					AN ADVOIDED FOR		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy 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 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 typed of Printed Name of Signing Officer of Director

Phesident 4-29-96