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

| - | | # P9500 & STORAGE, | | 2008 (3) | | | | | |
|--|--------------------|--|-----------------------|---|---------------------|---------------------|------------------|---|--|
| Principal Plac | ce of Business | · · · · · · · · · · · · · · · · · · · | Mé | Mailing Address | | | | | |
| 4560 NORTHGATE CT SARASOTA FL 34234 US | | | | 4560 NORTHGATE CT SARASOTA FL 34234-2123 US | | | | | |
| | | | • | •• | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 03/17/1995 04/18/1996 | |
| 2. Principal Place of Business | | | r | 2a. Mailing Address | | | | 4. FEI Number Applied For Not Applied ber Not Applied ber Not Applied ber Not Applied ber | |
| Sulte, Apt. #, etc. | | | 26] | Suitc, Apt. #, etc. | | | | ¢0.75 | |
| 22 | | | 27 | 27 | | | | 5. Certificate of Status Desired Fee Required | |
| City & State 13 Country | | | 28 | | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Feos | |
| Zip 24 | | | 29 | - ¬ ' | | ountry | | 8. This corporation has liability for intangible tax under s. 199.032, Ftorida Statutes | |
| | | and Address of Cur | | ered Agent | 1221 | | | 10. Name and Address of New Registered Agent | |
| ALA | N W CLARK | | | | | 81 | Name | | |
| 5108 89TH STREET, W BRADENTON FL 34210 | | | | | | 82 | Street Ac | t Address (P.O. Box Number is Not Acceptable) | |
| | | | | | | 83 | | | |
| | | | | | | | City | FL 85 Zip Code | |
| office or r | registered age | ent, or both, in the St | ate of Florid | 7.1508, Florida Statu a. Such change was Section 607.0505, Fl | authoriz | ed by | the corpo | corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered | |
| SIGNATURE | | | in in elementation is | | · | | | | |
| 12. | Signature, typed o | or printed name of registered OFFICERS. | AND DIREC | | 13 | | nt signarure rec | required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | P | | | DELFTE | | 101E | | Change Addition | |
| NAME | CLARK, AI | | | | 1.2 | NAME | | | |
| STREET ADDRESS | | | | Į. | | | ADDRESS | | |
| CITY-ST-ZIP | BRADENT | ON FL | | | | CITY-S | 1 - ZIP | | |
| TITLE | | | | | | 21 TITLE 22 NAME | | Change Addition | |
| STREET ADDRESS | | | | | | | ADDRESS | | |
| CITY-ST-ZIP | | | | | | T-ZIP | | | |
| TITLE | | | | | | 3.1 TITLE | | Change Addition | |
| NAME | | | 3 | | NAME | | | | |
| STREET ADDRESS | | | | | 3.3 | STREET | ADDRESS | | |
| CITY-ST-ZIP | | | | | | | T-7IP | | |
| TITLE | | | | ☐ DELETE | | TITLE | | Change Addition | |
| NAME ATORET ADDRESS | | | | | | NAME | 4000000 | | |
| STREET ADDRESS CITY-ST-ZIP | | | | | | CITY-SI | ADDRESS | | |
| TITLE | | | , | DELETE | | UIT-SI NILE | | Change Addition | |
| NAME | | | | 5.2 NA | | | | | |
| STREET ADDRESS | | | | | | | ADDRESS | | |
| City-St-ZiP | | | | | 5.4 CITY - ST - ZIP | | | | |
| TITLE | | | | ☐ DELETE | 6.1 | TITLE | | Change Addition | |
| NAME | | | | | 6.2 | NAME | } | | |
| STREET ADDRESS | | | | | 6.3 | STREET | ADDRESS | | |
| CITY-ST-ZIP | | | | | 6.4 | CITY-SI | - 21P | | |

I do 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 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 judged, or on an attachment with an address.

FILED

Apr 02 1997 8:00am

Secretary of State