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

DOCUMENT # P95000043135 (9)

JANZEN-HANSARD, INC.

137 MILL SPRING PLACE	137 MILL SPRING PLACE
ORMOND BEACH FL 32174	ORMOND BEACH FL 32174-4820
Principal Place of Business	Mailing Address

FILED May 01 1997 8:00am Secretary of State



137 MILL SPRING PLACE ORMOND BEACH FL 32174		137 MILL SPRING PLACE ORMOND BEACH FL 32174-4820									
						3	3. Date Incorporated or Qualifi 06/02/1995	I .	Date of Last F	Report	
	ace of Business	L	Mailing Address			4	4. FEI Number	1,		applied For	
21 1 Beagle's Rest		26	26 P. O. Box 31085				59-3320305		Not Applicable		
Suite, Apt. #, etc.		27	Suite, Apt #, etc.			5	5. Certificate of Status Desired Section Fee Required				
City & State 23 Ormone	Beach, FL	City & State 28 Ormond Beach, 1		ach. E	Τ.	6	Election Campaign Financing Trust Fund Contribution			\$5.00 May Be	
Zip	Country	20	Zip Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199,033					
32174		29	32173	<u> </u>	SA	l °	Florida Statutes	Yes :		5. 199.032,	
	9, Name and Address of Current			1001		10	0. Name and Address of Nev				
137 1	SARD, WILLIAM C MILL SPRING PLACE OND BEACH FL 32174				Name Street Greet Greet Greet Greet	Will Address (11am C. Hansard (P.O. Box Number is Not Acce anterbury Woods	ptable)	85 Zip	Code 2174	
11. Pursuant to	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with and accept the obligation	and 60	07.1508, Florida Statu la. Such change way	tes, the ab	ove-named by the corp	Orm d corporati rporation's	iond Beach, ion submits this statement for t board of directors. I hereby a	he purpose occept the ap	32 of changing bointment as	.174 its rogistered s registered	
SIGNATURE	Signature, and complime distance of registered agen	<u> </u>		$\sum I$	Agent signature			4/24	1/97		
12.	OFFICERS AND			13.			ADDITIONS/CHANGES TO O	FEICERS AN	D DIRECTO	RS IN 12	
TITLE	P		★ DELFTE	1.1 1/1	f	Pres	ident/Sec/Treas		change	Addition	
NAME	JANZEN, STAN			1.2 NA	Λŧ		iam C. Hansard				
STREET ADDRESS	34 MEADOW RIDGE VIEW			1.3 S1#	EE1 ADDRESS	1	nterbury Woods				
CHTY-ST-ZIP	ORMAOND BEACH FL 32174			1,4 CIT	r - ST - 7IP		nd Beach, FL 321	74			
TITLE	ST		☐ DELFTE	2.1 1(1)	F			-1-I	Change	Addition	
NAME	HANSARD, WILLIAM			2.2 NAI	ΛE						
STREET ADDRESS	137 MILL SPRING PLACE			2.3 STF	EF1 ADDRESS						
CITY-ST-ZIP	ORMOND BEACH FL 32174			2. 4 011	Y - \$1 - ZIF						
TITLE			DELETE	3.1 101	ŧ				Change	Addition	
NAME				3.2 NAI	ΛE						
STREET ADDRESS				3.3 S18	EE1 ADORESS						
CITY-ST-ZIP					Y-ST-ZIP						
TITLE			DELETE	4.1 101					Change	Addition	
NAME				4. 2 NA							
STREET ADDRESS				4.3 STF	EFT ADDRESS						
CITY-ST-ZIP			PELETE		/- ST- ZIP	ļ					
TITLE			☐ DELETE	5.1 TIT		-			Change	Addition	
NAME				5.2 NAI							
STREET ADDRESS					EF1 ADDRESS	1					
CITY-ST-ZIP			DELETE		(-ST-ZIP	 				4.330	
TITLE			☐ DELETE	6.1 1111					Change	Addition	
NAME				62 NAI							
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP	y certify that the information supplied	ariels 41	o Consideration		(- ST - ZIP	here and in O	2-41-140 07/050 60-02-0		197 - 1		
information I am an of	n indicated on this annual report or su ficer or director of the corporation or to block 12 or Block 13 if changed, or i	ipplenie he rece	ental annual report is: eiver or trustee empoy	true and a vered to ex	courate and	d that my s	signature shall have the same.	lenal effect a	e if made un	order nath: the	