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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

May 02 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## P95000046420 (2)

CITY-ST-ZIP

Principal Place of Business Mailing Address 4525 58TH AVE. VERO BEACH FL 32967 VERO BEACH FL 32967-4456								
						3. Date Incorporated or Qualified 06/12/1995	3a. Date of Last F 03/19/1996	Report
2. Principal P	lace of Business	2a. M	ailing Address			4. FEI Number		oplied For
21		26				65-0588297	No	ot Applicable
Suite, Apt.	#, etc.	Sı	uite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27				<u> </u>		equired
City & State	€	<u>-</u>	ity & State			6. Election Campaign Financing		May Be
Zip	Country	28 7		Country		Trust Fund Contribution		to Fees
24	25	29	ıp	30	'	8. This corporation has liability fo Florida Statutes	r intangible tax under s □ Yes □ No	s. 199.032,
24	9. Name and Address of Curre		ed Agent	1301		10. Name and Address of New R		
JACI	KSON, RAYMOND A			81	Name		<u> </u>	
4525	5 58TH AVE. O BEACH FL 32967			82 83	Street Add	fress (P.O. Box Number is Not Accepta	able)	
				84	City	Water Control of the	FL 85 Zip	Code
agent. I a SIGNATURE	m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN	ent and title if a	ppilosiak (NO			poration submits this statement for the tion's board of directors. I hereby acci ired when reinstaking) ADDITIONS/CHANGES TO OFF	DÄH	
TITLE	D		DELFTE	1.1 TITLE			Change	Addition
NAME	JACKSON, RAYMOND A			1,2 NAME				
STREET ADDRESS	4525 58TH AVE.			1.3 STREET	ADDRESS			
CITY-ST-ZIP	VERO BEACH FL 32967			1,4 CHY-5	SI-ZIP			
TITLE	D BONGON ELLA D		L_ DELETE	21 1111.			∟ Change	Addition
NAME	JACKSON, ELLA D 4525 58TH AVE.			2,2 NAME				
STREET ADDRESS	VERO BEACH FL 32967			2.3 STREE				
CITY-ST-ZIP TITLE	VENO BEAGITY E GEGOT		DELETE	2 4 CHY- 31 HILE	S1 - 71P		Change	Addition
NAME			L. DICCIL	3 2 NAME			one-tige	/100(tip))
STREET ADDRESS					I ADDRESS			
CITY-ST-ZIP				3.4. CI1Y -				
TITLE			DELETE	4 1 TITLE	×		☐ Change	Addition
NAME				4 2 NAME			•	
STREET ADDRESS					I ADDRESS			
CITY-ST-ZIP				4,4 CDY -	ì			
TITLE			DELETE	5 1 1111 (			☐ Change	Addition
NAME				5,2 NAME				
STREET ADDRESS				5 3 S1REE	ADDRESS			
CITY-ST-ZIP				5 4 CITY	S1 - 21P			
TITLE			DELETE	6.1 VIILE			Change	Addition
NAME				6,2 NAME				
STREET ADDRESS				6.3 STREE	I ADDRESS			

14. 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 if changed, or on an attachment with an address.

6.4 CITY - S1 - ZIP