## 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

POCUMENT # P95000049934 (9)

HTE - PROGRAMMED FOR SUCCESS, INC.

FILED
May 08 1997 8:00am
Secretary of State

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Principal Place of Business Mailing Address						1 1 4 6 1 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1	00111 01018 (011 <b>8</b> 101 <b>86</b> 111	
890 NORTH ORANGE AVENUE SUITE 8000 ORLANDO FL 32801-1693		390 NORTH ORANGE AVENUE SUITE 2000 ORLANDO FL 32801-1683						
						<ol> <li>Date Incorporated or Qualified 06/21/1995</li> </ol>	3a. Date of Last I 03/26/1996	Report
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	<del></del>	Applied For
21	# ala	26				59-3335216		lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	,	Additional Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		May Be I to Fees	
Zip	Country	Zip	<b></b>	Country		8. This corporation has liability for intangible tax under s. 199.032,		
24	9. Name and Address of Curren	1 Registered Agent	30			Florida Statutes  10. Name and Address of New Reg	Yes No	<del></del>
9. Name and Address of Current Registered Agent					e	10. Name and Address of New Neg	Jistered Agent	
GORNTO, L. A JR. 149-F S. RIDGEWOOD AVENUE			82	ļ		ddress (P.O. Box Number is Not Acceptable)		
DAYTONA BEACH FL 32114			83			s (P.O. Box Number is Not Acceptable		
			84					
				City	FL 85 Zip Code			
11. Pursuant office or a agent. I a	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the obligi	2 and 607.1508, Florida Statul of Florida. Such change was ations of, Section 607.0505, Fl	tes, the abov authorized b orida Statute	e-name y the co s.	ed corporation	ation submits this statement for the pun's board of directors. I hereby accept	urpose of changing it the appointment as	its registered s registered
SIGNATURE						67 J		
12.	Signature, typed or printed name of registered agr OFFICERS AN		II : Registered Ap	ent signatu	Jre required (	when reinstal rig) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTO	DS IN 12
TITLE	PD	DELETE	1.1 TITLE		VP	PINANCE	Change	Addition
NAME	HARWARD, DENNIS		1.2 NAME			LE PALOTICO		4.
STREET ADDRESS	390 N. ORANGE AVENUE, SUI	TE 2000	1.3 STREE	T ADDRESS	22	41 HEATHEROAK	DRIVE	
CITY-ST-ZIP	ORLANDO FL 32801		1.4 CITY-	ST - ZIP	A	41 HEATHEROAK COTKA PL 32703	3	
TITLE	STD	☐ DELFTE	2.1 TITLE				☐ Change	Addition
NAME	HARWARD, JACK		2.2 NAME	2.2 NAME				
STREET ADDRESS	390 N. ORANGE AVENUE, SUI	TE 2000	2.3 STREE	I ADDRESS	S			
CITY-ST-ZIP TITLE	ORLANDO FL 32801	DELETE	2.4 CITY-	S1 - 7IP				[ ] Laborer
NAME :	DAUMOS DADENT		3.1 TITLE				Change	Addition
STREET ADDRESS	AAA N ADANAF ATE AAAA		3.2 NAME	T ADDRESS				
CITY-ST-ZIP	AN 440A FL 00004			51 - ZIP	'			
TITLE	THE REPORT OF THE PROPERTY OF	DELETE 41		OI-ZA	<del> </del>		☐ Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS	·		4.3 STREE	ADDRESS	3			
CITY-ST-ZIP			4.4 CITY-	ST-71P				
TITLE		☐ DELETE	5.1 TITLE			,	Change	Addition
NAME			5.2 NAME					
STREET ADDRESS				I ADDRESS	5			
CITY-ST-ZIP		DELETE	5.4 CITY-1	ST-ZIP	ļ			Janes.
TITLE	101	DELETE	6.1 TITLE				Change	Addition
NAME Street adoress	411		6.2 NAME	1 1000000	,			
STREET ADURESS			6.3 STREE	I ADDRESS	1			

Ido 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 logal effect as if made under eath; 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

SIGKRIBUALKAUIRID

4/30/97 (407) 841 2735