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



Sandra B. Mortham

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FILE NOW: FI	LING FEE AFTER	FILED				
PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Mar 13 1997 8:00an Secretary of State		
Principal Place of Business 2001 N ELUS RD ANXSONVILLE FL 32254 US	Mailing 2001	998 (4) Addrass N ELLIS RD SONVILLE FL 3225	·			
				3. Date Incorporated or Qualified 06/27/1995	3a. Date of Last Report 04/03/1996	
2. Principal Place of Business	2a. Mai	ling Address		4. FEI Number 59-3324186	Applied For Not Applicable	
Sulte, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	e, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State	27 City	& State		6. Election Campaign Financing	Fee Required \$5.00 May Be	
2ip Coo	28 zip	· · · · · · · · · · · · · · · · · · ·	Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees	
4 25	29 Idress of Current Registered		30		Yes No	
office or registered agent, or tagent. I am familiar with, and SIGNATURE	ooth, in the State of Florida. S accept the obligations of, Sec	uch change was a stion 607.0505, Flo	authorized by the corpora orida Statutes.	poration submits this statement for the ation's board of directors. I hereby acce	ept the appointment as registered	
Signature, typed or printed	name of registered agent and title if app. OFFICERS AND DIRECTOR		Registered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12	
TITLE D URSO, ROSS		DELETE	1.1 THTLE		Change Addilio	
NAME UHSU, RUSS STREET ADDRESS 1734 PLANTAT	ION OAKS		1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP JACKSONVILLI	E FL 32223		1.4 CITY-ST · ZIF			
TITLE		DELETE	2.1 TITLE		Change Additio	
NAME STREET ADDRESS			2.2 NAME 2.3 STHEET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3 1 TITLE	17	Change Addition	
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-S1-ZIP			
ŢiŢLE .		DELETE	4 1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TrillE	, , , , , , , , , , , , , , , , , , , 	Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELFTE	5.4 CITY - ST - ZIP 6 1 TITLE		Change Additio	
NAME		O-11 1L	6.2 NAME		ET outside ET youldo	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	6-3-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	an elece color in the	64 CITY-ST-ZIP	d in Section 119.07(3)(i). Florida Statut		
	vicianos enstruces Mith this film	ALIGHA TOO SOOK OF	a tor the exemption efete	arin sacron 119.073701 Elabas Statut		

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.