

## 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 # POSOCOCKSSOO /7\

1. Corporation Name  1. Corpor							
}					3. Date Incorporated or Qualified	3a. Date of Last Report	
2. Principal P	lace of Business	2a. Mailing Address		<del></del>	07/10/1995 4. FEI Number	<b>02/13/1996</b> Applied For	
21	26				59-3328718	Not Applicable	
Suile, Apt. #, etc		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		City & State	7 City & State			Fee Required	
23	C	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Coun	try	8. This corporation has liability for in		
24	25 9. Name and Address of Current	29    Pagistered Agent	30		Florida Statutes  10. Name and Address of New Reg	Yes No	
ans	RNTO, L. A JR.	rtogistors Agont	<del> </del> i	31 Name	10. Hallo and Addiese of Hospital	Interior Agent	
	F S. RIDGEWOOD AVENUE			32 Street Add	iress (P.O. Box Number is Not Acceptable	(a)	
DAYTONA BEACH FL 32114							
				33			
			Ī	14 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607,0503	and 607.1508, Florida Statul	tes, the ab	ove-named cor	poration submits this statement for the pr		
office or r agent 1 a	registered agent, or both, in the State on familiar with, and accept the obligation in the state of the colors.	of Florida Such change was tions of, Section 607.0505, Fl	authorized orida Statu	by the corpora tes.	poration submits this statement for the pu ation's board of directors. I hereby accep	t the appointment as registered	
SIGNATURE						}	
12,	Signature, typed or practed name of registered agen OFFICERS AND		E Registered	Agent signature requ	iried when reinstalling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12	
tifle	PSTD	☐ DELETE	1.1 TITE	E		☐ Change ☐ Addition	
NAME	GREENWALD, JEFFREY S		1.2 NAA	1E [			
STREET ADDRESS	104 BLUE LAKE COURT		1	EET ADDRESS			
TITLE	LONGWOOD FL 32779-3545 VSTD	DELETE	2.1 TiTL	r-ST-ZIP		Change Addition	
NAME	HARWARD, DENNIS J		2.2 NAM	ŀ		End comigo Last riberton	
STREET ADORESS	4645 ALBRITTON ROAD			EET ADDRESS			
City-St-Ziir	ST. CLOUD FL 34772	LOUD FL 34772 2.41		Y - ST - ZIP	<del></del>		
TITLE		DELETE	31 TITL	Ĩ		Change Addition	
NAME STREET ADDRESS			3.2 NAM	NE EET ADDRESS			
CITY-ST-ZIP	}			Y-\$1-71P			
TOLE		DELETE	4.1 TITL		<del></del>	Change Addition	
NAME			4. 2 NAI	ME			
STREET ACOURESS			4.3 STR	EET ADDRESS			
CITY - ST - ZIP				r-ST-ZIP	·	Change Addition	
TITLE		DELETE 5.1 TIT				Change Addition	
STREET ADDRESS			5.2 NAM 5.3 STR	EET ADDRESS			
CHY-51-ZiF				-ST-ZIP			
TOTLE		DELETE	6.1 TITL			Change Addition	
NAME			6.2 NAN	Œ }			
STREET ADDRESS			6.3 STR	EET 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 fam 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

SIGNATURE:

**FILED** 

Apr 11 1997 8:00am

Secretary of State