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 # P95000058251 (6)

9. Name and Address of Current Registered Agent

WHAT A NEAT IDEA, INC.

GRAS, JUDITH A 14480 62ND ST N

CLEARWATER FL 34620

Principal Pia	ace of Business	Mailing Addres	Mailing Address						
14490 62ND CLEARWATE		14480 62ND ST N CLEARWATER FL 34620-2721							
					3. Date Incorporated or Qualified		•		
2, Principal	Place of Business	2a. Mailing Add	Iress	4.	FEI Number			Applied For	
21		26			59-3368649			Not Applica	
Suite, Ap	Suite, Apt. #, etc. Suite, Apt. #, etc. 27		t, etc.	5.	Certificate of Status Desired		SB.75 Additional Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8.	This corporation has liability for i	intangible	tax und	er s. 199.032	

11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

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83 84 Name

agent. I a	m familiar with, and accept the obligatio	ns of, Section 607.0505, Flo	rida Statutes.	,,		
SIGNATURE	Signature, typed or printed name of registered againt ar	d tile (lanolicable. (NOTi	: Registered Agent signature requi	red when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD	☐ DELETE	1.4 TITLE	☐ Change	Addition	
NAME	THOMAS, FRED A		1.P NAME			
STREET ADDRESS	14480 62ND ST N		1.B STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL		1.4 CiTY - S1 - ZiP			
TITLE	T	☐ DELETE	2.1 THLE	Change	Addition	
NAME	EISCH, JAMES P		2.P NAME			
STREET ADDRESS	14480 62ND ST N		2.B STREET ADDRESS			
CATY-ST-ZIP	CLEARWATER FL		2:4 CHY-ST-ZIP			
TITLE	VP	☐ DELETE	3.4 TITLE	☐ Change	Addition	
NAME	THOMAS, JOHN C		3 2 NAME			
STREET ADDRESS	14480 62ND ST N		3.B STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL		3 4. CITY-ST-ZIP			
TITLE		☐ DELETE	41 TITLE	☐ Change	Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.9 STREET ADDRESS			
CITY-ST-ZIP			4.4 City-St-Zip			
TITLE		☐ DELETE	51 TITLE	☐ Change	Addition	
NAME			52 NAME			
STREET ADDRESS			58 STREET ADDRESS			
CITY-ST-ZIP			5 # CITY-ST-ZIP		_	
TITLE		☐ DELETE	6.1 TITLE	Change _	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

6.4 City - St - ZiP 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 or tlachment with an address

FILED

May 09 1997 8:00am

Secretary of State

X Yes

10. Name and Address of New Registered Agent

Florida Statutes

Street Address (P.O. Box Number is Not Acceptable)

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Zip Code