## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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P95000062449 (0)

1. Corporation	MENT # P95000 SOUTH, INC.	0062449 ((	0)		8) (A 8)
Principal Place	of Business	Mailing Address			BYTO ONLY OTSYY DYDYD HOYY KÔT!
1101 SOUTH BELCHER ROAD 110		1101 SOUTH BELCH LARGO FL 34641	ER ROAD		
				3. Date incorporated or Qualified 3a. 08/11/1995	Date of Last Report
2. Principal Pla	nce of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		<u> 59-3336398</u>	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
Orty & State		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
.≮91 Z(p	Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for intangi	Added to Fees ble tax under s. 199 032
[24]	25	29	30	Florida Statutes  Yes Y	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
COUGH	LIN, MIKE				
	OUTH BELCHER ROAD		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
LARGO	FL 34641		83		
			84 City		85 Zip Code
SIGNATURE .	and agent, or both, in the State of Honda in, and accept the obligations of, Section is noted that the policy are straight and appear	in 607.0505, Florida Statute	tes, the adove-framed corpored by the corporation's boass.	ration submits this statement for the purpose of aid of directors. I hereby accept the appointment of the purpose of the appointment of the purpose of the p	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	<u></u>
THLE NAME	COUGHLIN, MIKE	DETELE	1 1 TITLE 1 2 NAME		Change Addition
STREET ADDRESS	1101 SOUTH BELCHER ROAL	)	13 STREET ADDRESS		
CHY ST ZIE	LARGO FL 34641		14 CITY-ST-ZIP		
TATLE	VSD Coughlin, Wendy	☐ DELETE	2 1 TITLE		Change Addition
NAMI STREET ADDRESS	1101 SOUTH BELCHER ROAL	)	2.2 NAME 2.3 STREET ADDRESS		
CHY ST 7F	LARGO FL 34641		2 4 CITY-ST-ZIP		
1006		DELETE	3 1 TiTLE		Change Addition
NAME			3 2 NAME		
STHEET ACORESS OF YEST-ZIP			3.3 STREET ADORESS 3.4 CITY - ST - ZIP		
TOLE		☐ DÉLÉTE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREFT ADDRESS		
CITY ST ZIF		DELETE	4.4 C(1Y - S1 - ZIP 5 1 T(TLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CHY-SE-ZH THE	· · · · · · · · · · · · · · · · · · ·	DELETE	5 4 CITY-ST-ZIP		Change Addition
NAM:		[] better	6 1 TITLE 6 2 NAME		Change Addition
STREET ADDRESS			63 STREFT ADDRESS		
City-SI-Zii			6.4 CITY - ST - ZIP		
certify that i oath that I	the information indicated on this annua	I report or supplemental and ation or the receiver or truste	nual report is true and accura se empowered to execute the	for the exemption stated in Section 119.07(3)(k ate and that my signature shall have the same l is report as required by Chapter 607, Florida S	enal effect as if made under

**SIGNATURE:** 

ING OFFICER OR DIRECTOR

2/21/96 813-524-1080