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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

PÖCUMENT # P95000066489 (2)

POCU	1997 MENT # P95000	0066489 (2)	ORPORATIONS			<u>J</u>		
1.4	GICAL CONSULTING ORGA							
Principal Plac	e of Business	Mailing Address			A HOOMBAA DID TANDI OKKII ORUK DORKI DOR			100) (CO)
4206 BIX FOR	KS RD	P.O. BOX 1876						
220	nganá	MT DORA FL 32757-1878 US						
RALEIOH NC 2	27009	Uð		-	3. Date Incorporated or Qualified	3a. Date	e of Last R	leport
				1	08/28/1995		5/1996	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number			oplied For
21		26 4208 Six Fork	ks Road		59-3330888			ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.]	5. Certificate of Status Desired		\$8.75	
22 City & Stat	la	27 220 City & State			A Constant Constant Constant	· 	Fee Re	 -
23		28 Raleigh, NC			6. Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added 1	May Be
Zip	Country		Country		8. This corporation has liability for			
24	25	^{Z_{IP}} 27609	usa'			Yes		. 100.002
	9. Name and Address of Curren	t Registered Agent			Name and Address of New Re	gistered A	gent	
	VIMBRS, GRY L		81 Name	•				
380	82 Street	Address	(P.O. Box Number is Not Acceptat	ole)				
TAVARES FL 32778-3298			83	·	······			
			63					
			84 City			FL	85 Zip I	Code
11. Pursuant office or i agent. I a SIGNATURE	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga						hanging it intment as	s registered registered
12.	Signature, typed or printed name of registered ago OFFICERS ANI		Registered Agent signature	re required w	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND I	DIRECTOR	R IN 12
TITLE	D	DELETE	1.1 TITLE	1	ABBITTOTOTOTOTOTO		L4	Addition
NAME	RICE, KELLY N		1.2 NAME	}			zip c	ode
STREET ADDRESS	4208 SIX FORKS ROAD SUITE	220	1.3 STHEET ADDRESS					
CITY-ST-ZIP	RALEIGH NC 34609		1.4 CITY - ST - ZIP	Rale	eigh, NC 27609			
TITLE	D	DELFTE	2.1 TIJEE	Ţ,,,,,		•	Change	Addition
NAME .	RICE, STEVEN M	_	2.2 NAME			:	zip co	de
STREET ADDRESS	4208 SIX FORKS ROAD SUITE	220	2.3 STREFT ADDRESS	0-16	siah UC 07600			
CITY-ST-ZIP	RALEIGH NC 34609	T DELETE	2. 4 CITY - ST - ZIP	Kale	eigh, NC 27609		10000	1 4 4 404
TITLE	D ADAMO STEDUENI D	L DÉLETF	3.1 Tale				Change	Addition
NAME OTOTOT ADDOCCO	ADAMS, STEPHEN R 2001 OLD US HWY 441		3.2 NAME					
STREET ADDRESS OITY - ST - ZIP	MT DORA FL 32757		3.3 STREET ADDRESS					
TITLE	MI DOING IL SEISI	DELETE	3.4. CITY-S1-ZIP 4.1 TITLE	-		Г	Change	Addition
NAME		<u> </u>	4. 2 NAME			_	_ +: ::::::::::::::::::::::::::::::::::	
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CHY+ST-ZIP	<u> </u>				
) TITLE		☐ DELETE	6.1 TITLE			Ł	Change	Add-tion
NAME			6.2 NAME	1				
STREET ADDRESS			63 STREET ADDRESS					
AID AT THE	•		E CARITY OF TIC					

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 is changed, or on an attachment with an address.

SIGNATURE:

(919) 786-0700