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 # **P95000072067** (8)

DISCOVER INNER SPACE, INC.



97 JUN 20 MM 7: 113

SECKETARY OF STATE TALLAHASSEE FLORIDA



Principal Place of Business Mailing Address 1169 EIGHTH STREET SOUTH NAPLES FL 33940-7365 HAPLES FL 34102-7306						F SERVICE (SE TRUET BINN BRIN BRIN BRIN BRIS BRIN 1884 1880 2011 2011 2011 2011			
						3. Date Incorporated or Qualified 09/18/1995		te of Last 2/1996	Report
2. Principal P 21	Place of Business	2a. Mailing Address 26			4. FEI Number Applied For 65-0608673 Not Applied be				
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29		30			Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Reg	stered A	gent	
	BUE, RONALD C		8	31	Name				
	9 Eighth Street, South Les Fl 33940-7385		8	32	Street Addr	ddress (P.O. Box Number is Not Acceptable)			 ,
100			8	33	· .				
			8	34	City		FL	85 Zip	Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 registered agont, or both, in the State c am familiar with, and accept the obligat	and 607.1508, Florida Statu of Florida, Such change was tions of, Section 607.0505, F	ules, the abo authorized lorida Statut	by t	named corp the corporat	poration submits this statement for the pricion's board of directors. I hereby accep	rpose of the app	changing pintment a	its registered s registered
SIGNATURE	Signature, typed or printed name of registered agen					ed when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	PVST	☐ DELETE	1.1 1111.0	E				Change	Addition
NAME	HOGUE, RONALD C	1169 EIGITH STREET SOUTH		1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP	NAPLES FL 33940	T bevere	1.4 C/TY		- ZIP				
TITLE	JOOHE BONNID O			21 TITLE				Change	Addition
NAME OTOTET ADODESS	1169 EIGITH STREET SOUTH	A FIGHTH CTOCKT COLUMN		2 2 NAME					
STREET ADDRESS CITY-ST-ZIP	NAPLES FL 33940		1	2.3 STREET ADDRESS 2.4 CRY: ST-ZIP		2000022	211	1632	
TITLE				3.1 TITLE		2000022	701	O Shange	O T Addition
NAME	KING, ROBERT					****16S		****	65.00
STREET ADDRESS	6336 28TH TERR., SW		3.3 STRE		DDRESS				
CITY-ST-ZIP	NAPLES FL 33999		3.4. City		1				
TITLE	VP	DELETE	4.1 TITLE				~	Change	Addition
NAME	RICE, TIMOTHY		4. 2 NAM	/E	}				
STREET ADDRESS	6336 28TH TERR., SW		4.3 STRE	ET A	DDRESS				
CITY-ST-ZIP	NAPLES FL 33999		4.4 CITY	- \$1-	ZIP				
TITLE ,		DELETE	5.1 TITLE	Ε				☐ Change	Addition
NAME			5.2 NAM	E					
STREET ADDRESS			5.3 STRE	ET A	DDRESS				
CITY-ST-ZIP			5.4 CITY		ZIP .				
TATLE		DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAM						
STREET ADDRESS			6.3 STRE						
CITY-ST-ZIP		·	6.4 CHY	- S T -	7IP				

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 that I am an officer or director of the corporation or the receiver or trustee impowered 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.