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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

Principal Place of Business

P95000074311 (8) **DOCUMENT #**

MARTIN W. HILLIARD, CPA, P.A.



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2461 E. BUR Sarasota i	R OAK COURT FL 34232	2461 E. BURR OAK (SARASOTA FL 34232					
					3. Date Incorporated or Qualified 10/01/1995	3a. Date of N/A	
2. Principal Pla		2a. Mailing Address		70 0000	4. FEI Number		Applied For
	2nd St.	26			65-0614715		Not Applicable
Suite, Apt. #, etc. Suite 808-3		Suite, Apt. #, etc.		5. Certificate of Status Desired	atus Desired S8.75 Additional Fee Required		
	ota, FL	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Ζφ 24 34236	Country 25 Sarasota	Ζιρ 29	Count 30	ry	8. This corporation has liability for in Florida Statutes X Yes		nder s 199.032,
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New R	egistered Age	ent
			8	1 Name			
2461 E.	d, martin w Burr oak court		8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
SARASO	ITA FL 34232		8	3			
				4 City		- !	5 Zip Code
				named corporporation's boa	oration submits this statement for the purp ard of directors. I hereby accept the appo		ng its registered offic istered agent. I am
TOT HIS ST. TYTE	is and accept the obligations of, acci	ion gora rs os, nonda statute	S.				
SIGNATURE: 🗍	North W, Hell	went Mar	rem A	o, Hill	realizably brail	4 -	51-16
	ignature, lyped or printen name of registered agent	and title if eppicable (N	OIL Registered Ag	or Esignature require	ed when reinstating)		
12.	signature, typed or printen name of registered agent OFFICERS AN	and tito if eggicable (N DIDIRECTORS	Olt - Registered Ag	jer I signature require	od when renstatright ADDITIONS/CHANGES TO OFFICE	CERS AND DIF	RECTORS IN 12
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12. TITLE	gradue, typed or printed marks of registers, I agent OFFICERS AN D HILLIARD, MARTIN W	and tito if eggicable (N DIDIRECTORS	DIE Rogistered Ag 13. 1, 1 THLI 1,2 NAM6	er I signature require	ed when reinstating)	CERS AND DIF	RECTORS IN 12
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ceruly 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 trusted 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 on an attachment with an address.

SIGNATURE: Matte W. Bellind Martin W. Hilliard 4-29-96 941-362-888