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 # P95000076162 (3)

Principal Place of Business Mailing Address 313 DIRKSEN DRIVE 313 DIRKSEN DRIVE DEBARY FL 32713 DEBARY FL 32713-3934					
				1	Date of Last Report
2. Principal	Prace of Business	2a. Mailing Address		10/05/1995 4. FEI Number	05/01/1996 Applied For
21		26		59-3347677	Not Applicable
Suite, Ap	t #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & St	ato	City & State		& Floating Comparing Floating	Fee Required
23	:40	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z _i p	Country	8. This corporation has liability for inter-	
24	25	29	30	Florida Statutes	es 🗌 No
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Regist	tered Agent
	ARKEY, MARGARET		Name		
7190 WILSON STREET			82 Street Ac	82 Street Address (P.O. Box Number is Not Acceptable)	
HU	OLLYWOOD FL 33024		83		
			84 City		FL 85 Zip Code
11. Pursuan	I to the provisions of Sections 607.05	02 and 607 1508, Florida Statu	tes, the above-named co	orporation submits this statement for the purp	ose of changing its registered
ottice or agent T	r registered agent, or both, in the Stat -am familiar with, and accept the obli	te of Florida. Such change was gations of, Section 607.0505, Fl	authorized by the corpo orida Statutes.	ration's board of directors. I hereby accept the	e appointment as registered
SIGNATURE					
	Signature, typed or paniod name of registered a		E: Registered Agent signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
12. 101.E	P	ND DIRECTORS	13.		Change Addition
NAME	STARKEY, GREGG P	N.A.	1.2 NAME	P/V/T/S/c	Jag Ondings
STREET ADDRESS			1.3 STREET ADDRESS	STARKEY, RONALD JAY	
CITY-ST-ZIP	HOLLYWOOD FL 33024		1.4 CITY-ST-ZIP	313 DIRKSEN DRIVE S	
TITLE	VP	XX)ELEYE	2.1 TITLE	DEBARY, FLORIDA 327	Change Addition
NAME	TAYLOR, JUDY L		2.2 NAME	·	
STREET ADORESS		B-8	2.3 STREET ADDRESS		
CITY - \$1 - ZIP	DEBARY FL 32713		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	5		3.3 STREET ADDRESS		
City-St-ZiP		DELETE	3.4. CITY-ST-ZIP	<u> </u>	Change Addition
THE		□ DELETE	4.1 TITLE		Fin cuands (T) Vonition (
NAME CONTACT ACCOUNTS	.]		4.2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS CHTY+ST+ZIP			4.4 City-St-Zip		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY- ST- ZIP			5.4 CITY-ST-ZIP		
1011		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS	s		63 STREET ADDRESS		

14. Ido 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 cath; 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 on an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

RONALD PAY BEAR REPRESENTED THE PROPERTY OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

FILED

Apr 23 1997 8:00am

Secretary of State