со	FILE NOW: FILI PROFIT RPORATION UAL REPORT 1997	TON Sandra B. Mortham PORT Socretary of State		ARIMENT OF STATE <b>a B. Mortham</b> plary of State	FILED Mar 18 1997 8:00a Secretary of State			
AHJ & / Principal Place 22 LAKEVIEW	ASSOCIATES, INC	Ма 122 222	iiling Address LAKEVIEW AVE, SU	ITE 160. ROOM 122				
ICOI PALM O	BEACH FL 33401	WES	ST PALM BEACH FL	33401	<ol> <li>Date incorporated or Qualifie 10/09/1995</li> </ol>	1	ite of Last R <b>4/1996</b>	leport
- ·	Place of Business		Mailing Address		4. FEI Number		Ar	pplied For
1 Suite, Apt	. #, eic.	26	Suite, Apt. #, etc.		65-0615022 5. Certificate of Status Desired		\$8.75	
2 City & Sta	nte	27	City & State		6. Election Campaign Financing		Fee Re <b>\$5.00</b>	
Zip	Countr	28 y	Zip	Country	Trust Fund Contribution 8. This corporation has liability		Added	to Fees
]	25 9 Name and Addre	29 ss of Current Regist	arad Acant	30	Florida Statutes	🛄 Yes 🔲	No	. 100.002, 
JOH	INSON, ART	as of current negist	ered Agent	81 Name	10. Name and Address of New	Registered #	Agent	
	FIRETREE RD			82 Street Add	dress (P.O. Box Number is Not Accept	stable)	···	
NOF	RTH PALM BEACH FL	33408		83	······			
	:		17. 1508, Florida Sla	84 City	poration submits this statement for th	FL ne purpose of	85 Zip (	
11. Pursuant office or agent. I SIGNATURE	t to the provisions of Sect registered agont, or bolt am familiar with, and acc Signature, typed or printed name	tions 607.0502 and 60 n, in the State of Florid opt the obligations of,	f applicable (N	84 City tutes, the above-named cor s authorized by the corpora f lorida Statutes.	· · · · · · · · · · · · · · · · · · ·	ne purpose of cept the appo DATE	changing it pintment as	s registerec registered
11. Pursuant office or agent. I (	I to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O	tions 607.0502 and 60 , in the State of Florid ept the obligations of,	f applicable (N	84 City tutes, the above-named cors authorized by the corpora f lorida Statutes.		ne purpose of cept the appo DATE	changing it pintment as	s registered registered
11. Pursuant office or agent. 1 a SIGNATURE 12.	t to the provisions of Sect registered agont, or bolt am familiar with, and acc Stonature, typed or printed name O P JOHNSON, ART	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C	fapplicable (N TORS	84         City           tutes, the above-named cors         sauthorized by the corporation of the corporatin of the corporation of the corporation of the corporation of the	vired when roinstating)	ne purpose of cept the appo DATE	changing it pintment as	s registered registered IS IN 12
11. Pursuant office or agent. 1 SIGNATURE 12. ITTLE VAME STREET ADDRESS	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	fapplicable (N TORS	84         City           Iutes, the above-named corse authorized by the corporation of	vired when roinstating)	ne purpose of cept the appo DATE	changing it pintment as	s registered registered IS IN 12
11. Pursuant office or agent. 1 a SIGNATURE 12.	t to the provisions of Sect registered agont, or bolt am familiar with, and acc Stoneture, typed or printed name O P JOHNSON, ART	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	fapplicable (N TORS	84         City           tutes, the above-named cors         sauthorized by the corpora           s authorized by the corpora         florida Statutes.           OTE: Registered Agent signature required         13.           1.1 TILE         1.2 NAME	vired when roinstating)	DATE COLORING AND DATE FICERS AND	changing it pintment as	s registered registered IS IN 12
11. Pursuant office or agent. 1 SIGNATURE 12. 11TLE VAME STREET ADDRESS XITY-ST-ZIP 11TLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	ferplicate (N TORS DELETE	84     City       tutes, the above-named cors       s authorized by the corporal       Florida Statutes.       ODE: Registered Agent signature required       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-S1-ZIP       2.1 THLE       2.1 THLE       2.1 NME	vired when roinstating)	DATE COLORING AND DATE FICERS AND	Changing it bintment as DIRECTOR Change	s registored registered S IN 12
11. Pursuant office or agent. 1 SIGNATURE 12. 11TLE VAME STREET ADDRESS XITY-ST-ZIP IITLE VAME STREET ADDRESS	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	ferplicate (N TORS DELETE	84     City       tutes, the above-named corse southerized by the corporation by the corporation of the corporation o	vired when roinstating)	DATE COLORING AND DATE FICERS AND	Changing it bintment as DIRECTOR Change	s registored registered S IN 12
11. Pursuant office or agent. 1 SIGNATURE 12. 11TLE VAME STREET ADDRESS XITY-ST-ZIP 11TLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	ferplicate (N TORS DELETE	84     City       tutes, the above-named cors       s authorized by the corporal       Florida Statutes.       ODE: Registered Agent signature required       13.       1.1 THLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-S1-ZIP       2.1 THLE       2.1 THLE       2.1 NME	vired when roinstating)	Depurpose of coopt the appo	Changing it bintment as DIRECTOR Change	s registered registered S IN 12
11. Pursuant office or agent. I SIGNATURE 12. IITLE VAME STREET ADDRESS XITY-ST-ZIP IITLE VAME STREET ADDRESS XITY-ST-ZIP IITLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	t epplicable (N 10785 DELETE DELETE	B4     City       tutes, the above-named corses authorized by the corporal florida Statutes.       CHE: Registered Agent signature required as a static statutes.       13:       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TIRLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIRLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIRLE       3.2 NAME	vired when roinstating)	Depurpose of coopt the appo	Changing il bintmont as DIRECTOR Change	s registered registered S IN 12
11. Pursuant office or agont. 1 ( SIGNATURE 12. 11. 11. 11. 11. 11. 11. 11. 11. 11.	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	t epplicable (N 10785 DELETE DELETE	B4     City       tutes, the above-named corses authorized by the corporal florida Statutes.       City       101E: Registered Agent signature required       13.       1.1 TILE       1.3 STREELADDRESS       2 NAME       2 STREELADDRESS       2 4 City-S1-ZIP       3.1 TILE       2 4 City-S1-ZIP       3.1 TILE       3.3 STREELADDRESS	vired when roinstating)	Depurpose of coopt the appo	Changing il bintmont as DIRECTOR Change	s registered registered S IN 12
11. Pursuant office or agent. I SIGNATURE 12. IITLE VAME STREET ADDRESS XITY-ST-ZIP IITLE VAME STREET ADDRESS XITY-ST-ZIP IITLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	t epplicable (N 10785 DELETE DELETE	B4     City       tutes, the above-named corses authorized by the corporal florida Statutes.       CHE: Registered Agent signature required as a static statutes.       13:       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TIRLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIRLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TIRLE       3.2 NAME	vired when roinstating)	DATE DATE FICERS AND	Changing il bintmont as DIRECTOR Change	s registered registered S IN 12 Addition
11. Pursuant office or agont. 1 4 SIGNATURE 12. 11. 11. 12. 11. 11. 11. 11. 11. 11.	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	repolicative (N 1 ORS DELETE DELETE DELETE DELETE	B4     City       Iutes, the above-named cors southorized by the corporal Florida Statutes.       IOTE: Registered Agent signature required 13.       1.1 TILE       1.2 NAME       1.3 STREELADDRESS       1.4 CITY-ST-ZIP       2.1 TILE       2.3 STREELADDRESS       2.4 CITY-ST-ZIP       3.1 TILE       3.2 NAME       3.3 STREELADDRESS       3.4 CITY-ST-ZIP       4.1 TILE       4.2 NAME       3.4 CITY-ST-ZIP       4.1 TILE       4.2 NAME	vired when roinstating)	DATE DATE FICERS AND	Changing il ointment as DIRECTOR Change	s registered registered S IN 12 Addition
11. Pursuant office or agent. 1 SIGNATURE 12. 11. STREET ADDRESS XTY-ST-ZIP 11. ITLE IAME STREET ADDRESS XTY-ST-ZIP 11. ITLE IAME STREET ADDRESS XTY-ST-ZIP 11. ITLE IAME STREET ADDRESS	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	repolicative (N 1 ORS DELETE DELETE DELETE DELETE	B4     City       tutes, the above-named corse authorized by the corporal florida Statutes.       GHE: Registered Agent signature required as the corporal florida Statutes.       11:1000       13:11000       13:11000       13:11000       13:11000       13:11000       13:11000       14:0117-51-700       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       21:11000       31:11000       31:11000       31:11000       32:11000       33:11000       34:0117-51-700       41:11000       42:11000       43:110000	vired when roinstating)	DATE DATE FICERS AND	Changing il ointment as DIRECTOR Change	s registered registered S IN 12 Addition
11. Pursuant office or agont. 1 4 SIGNATURE 12. 11. 11. 12. 11. 11. 11. 11. 11. 11.	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D	repolicative (N 1 ORS DELETE DELETE DELETE DELETE	B4     City       Iutes, the above-named cors southorized by the corporal Florida Statutes.       IOTE: Registered Agent signature required 13.       1.1 TILE       1.2 NAME       1.3 STREELADDRESS       1.4 CITY-ST-ZIP       2.1 TILE       2.3 STREELADDRESS       2.4 CITY-ST-ZIP       3.1 TILE       3.2 NAME       3.3 STREELADDRESS       3.4 CITY-ST-ZIP       4.1 TILE       4.2 NAME       3.4 CITY-ST-ZIP       4.1 TILE       4.2 NAME	vired when roinstating)	DATE	Changing il ointment as DIRECTOR Change	s registered registered S IN 12 Addition
11. Pursuant office or agent. 1 SIGNATURE 12. ITTLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D		B4     City       tutes, the above-named corse southorized by the corporal florida Statutes.       GHE Registered Agent signature required as the corporal signature required as the corporation sis the corporation signate required as the	vired when roinstating)	DATE	Changing il ointment as DIRECTOR Change	s registered registered S IN 12 Addition
11. Pursuant office or agent. 1 SIGNATURE 12. IITLE IAME STREET ADDRESS SITY-ST-ZIP IITLE IAME STREET ADDRESS SITY-ST-ZIP IITLE IAME STREET ADDRESS SITY-ST-ZIP IITLE IAME STREET ADDRESS SITY-ST-ZIP IITLE IAME STREET ADDRESS	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D		B4     City       tutes, the above-named corse authorized by the corporal florida Statutes.       GIE: Registered Agent signature required       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-S1-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-S1-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-S1-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4 CITY-S1-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS	vired when roinstating)	DATE	Changing il ointment as DIRECTOR Change	s registered registered S IN 12 Addition
11. Pursuant office or agent. 1 SIGNATURE 12. ITTLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D		B4     City       tutes, the above-named corse authorized by the corporal florida Statutes.       GHE Registered Agent signature required       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.2 NAME	vired when roinstating)	DAIL DAIL FICERS AND	Changing il ointment as DIRECTOR Change	s registered registered S IN 12
11. Pursuant office or agent. 1 SIGNATURE 12. ITTLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP ITLE VAME STREET ADDRESS SITY-ST-ZIP	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D		B4     City       tutes, the above-named corse southorized by the corporal florida Statutes.       GHE Registered Agent signature required       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CITY-ST-ZIP	vired when roinstating)	DAIL DAIL FICERS AND	changing il changing il controent as DIRECTOR Change Change Change Change	s registored registered S IN 12 Addition
11. Pursuant office or agent. 1 SIGNATURE 12. ITTLE VAME STREET ADDRESS STTY-ST-ZIP ITLE VAME STREET ADDRESS STTY-ST-ZIP ITLE VAME STREET ADDRESS STTY-ST-ZIP ITLE VAME STREET ADDRESS STTY-ST-ZIP ITLE VAME STREET ADDRESS STTY-ST-ZIP ITLE VAME	t to the provisions of Sect registered agont, or both am familiar with, and acc Signature, typed or printed name O P JOHNSON, ART 921 FIRETREE ROA	tions 607.0502 and 60 n, in the State of Florid ept the obligations of, an registered agent and title if FFICERS AND DIRE C D		B4     City       Iutes, the above-named corss authorized by the corporal Florida Statutes.       OTE: Registered Agent signature required       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-S1-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-S1-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-S1-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4 CITY-S1-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CITY-S1-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CITY-S1-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CITY-S1-ZIP	vired when roinstating)	DAIL DAIL FICERS AND	changing il changing il controent as DIRECTOR Change Change Change Change	s registored registered S IN 12 Addition