## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000081690 (6)

1. Corporation Name

SIGNATURE:

1	H.	COR	PORA'	TION	OF.	RR/	<b>IDEN</b>	ITON
L	٠П٠	UUN	T VITA		vı -	DI W	WLIT	

Principal Place of Business Mailing Address 7465 MANATEE AVENUE WEST 7465 MANATEE AVENUE WEST **BRADENTON FL 34209 BRADENTON FL 34209** 3. Date Incorporated or Qualified 10/25/1995 3a. Date of Last Report 2a. Mailing Address Applied For 2. Principal Place of Business Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032, Zip Country Zω Yes No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HAWKINS, JOHN D Street Address (P.O. Box Number is Not Acceptable) 82 **1023 MANATEE AVENUE WEST** 83 **BRADENTONA FL 34205** City 85 Zip Code 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agert signature required when reinstating) Signature, typed or printed name of registered agent and the if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition [ ] DELETE 1 1 TITLE TITLE WHATLEY, BOBBY N CR2E034 1.2 NAME NAME 2619 51ST STREET WEST STREET ADDRESS 1.3 STREET ADDRESS **BRADENTONA FL 34209** 1.4 CITY - \$1 - 2IP CITY-ST-ZIF ☐ Change ☐ Addition DELETE 2. 1 TITLE TITLE WHATLEY, MARILYN 2.2 NAM5 NAME 2619 51ST STREET WEST 2.3 STREET ADDRESS STREET ADDRESS **BRADENTONA FL 34209** 24 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 3 1 THILE TITLE LAURA HELEN SCOTT NAME 4001 - 513T DR. W. 3.3 STREET ADDRESS STREET ADDRESS BRADENTON, FL 34210 3.4 CITY - ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY - \$1 - 7:P ☐ Change Addition [T] DELETE 5.1 IDIE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIF DELETE ☐ Change Addition 6. 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CHY-ST-ZiP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 out usee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Prone #