

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

112

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000081727  
1. Corporation Name

Anchor Resolution Center, Inc.

97 JUL 11 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address  
1406 Glendover Ct. SAME  
TARPOON SPRINGS, FLA.  
34689

3. Date Incorporated or Qualified Oct. 25, 1995  
3a. Date of Last Report  
4. FEI Number: 59-3374294 Applied For Not Applicable  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address  
21 1406 Glendover Ct. 26 SAME  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 Tarpon Springs 27  
City & State City & State  
23 FLA 28  
Zip Country Zip Country  
24 34689 25 USA 29 30

9. Name and Address of Current Registered Agent  
Jackie K. Housel  
1406 Glendover Ct.  
TARPOON SPRING, FLA.  
34689

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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 Jackie K. Housel  
Signature, type or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS  
TITLE  DELETE  
NAME Seed/Measures  
STREET ADDRESS David Housel  
CITY-ST-ZIP 1406 Glendover Ct.  
Tarpon Springs, FL. 34689  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 Change  Addition  
11 TITLE  
12 NAME  
13 STREET ADDRESS 600002239286-8  
14 CITY-ST-ZIP -07/16/97-01049-010  
\*\*\*\*165.00  Change  Addition  
21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP  
31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP  
41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP  
51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP  
61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

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 oath; 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.

SIGNATURE: Jackie K. Housel Jackie K. Housel 6/12/97 (813)944-3048  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

7/2

I never received  
original document.  
Called and per  
conversation am  
sending check for  
165.00. Thank-you  
Jackie K. Housel