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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000087350** (1)

| Principal Place of Business Mailing Address 6101 34TH ST. WEST P.O. BOX 996 SUITE 20A SARASOTA FL 34230-0996 BRADENTON FL 34210 US | | | | | | | | |
|---|---|----------------------------------|--------------------------|----------|---|-------------------|----------------------------|-------------------|
| US | | | | | 3. Date Incorporated or Qualified 11/14/1995 | | Date of Last R /12/1996 | eport |
| 2. Principal F | Place of Business | 2a. Mailing Address | | | 4. FEI Number 65-0625417 | | | oplied For |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 Fee Re | Additional |
| City & Stat | te | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | | May Be to Fees |
| Zip | Country 25 | Ζφ 29 | Country 30 | / | 8. This corporation has liability to Florida Statutes | r intangib Yes | | |
| 005 | 9. Name and Address of Curr | and the same of the contraction | 81 | Name | 10. Name and Address of New I | legistere | l Agent | |
| | RPORATION SERVICE COMPAN 1 HAYS STREET | ıt | 82 | | lress (P.O. Box Number is Not Accept | able) | | |
| | LAHASSEE FL 32301-2525 | | 83 | | TOO (1.0. DON'TO TIDE! TO TO! TOOOP! | | | |
| | | | | | | | | - |
| | | | 84 | City | | F | 85 Zip | Code |
| agent. I a | am familiar with, and accopt the ob- | igations of, Section 607.0505, F | Iorida Statuto | S. | poration submits this statement for the tition's board of directors. I hereby acc | DATE | | |
| 12. | OFFICERS A | ND DIRECTORS DELETE | 13. | F | ADDITIONS/CHANGES TO OFF | ICEHS AN | Change | S IN 12 Addition |
| NAME | CUSATI, R.D. | | 1.2 NAME | | cusari R.D. | | 77 | ecriou |
| STREET ADDRESS | 61991 34TH ST. WEST | | 1.3 STREET | ADDRESS | 6101 34NST. WE | 51 | | |
| CITY-ST-ZIP | BRADENTON FL | Driete | 1.4 CITY - S | S1 - ZIP | BRADOUTON FL | | <u> </u> | 1.420 |
| TITLE NAME | VP AMES, MARTHA J. | L_ DELETE | 2.1 TITLE 2.2 NAME | | | | ☐ Change | Addition |
| STREET ADDRESS | 6101 34TH ST. WEST | | 2.2 NOTALE 1 | ADDRESS | | | | |
| CITY-ST-ZIP | BRADENTON FL | | 2 4 CITY- | | | | | |
| TITLE | D | Delete | 3 1 TILLE | | | | Change | Addition |
| NAME | CUSATI, SUZANNE | | 3 2 NAME | | | | | |
| STREET ADDRESS | 703 MAGELLAN DRIVE | | 3 3 STREET | | | | | |
| CITY-ST-ZIP TITLE | SARASOTA FL | DELETE | 3.4. C(1) - 4.1 TILLE | S1 - Z(P | | | Change | Addition |
| NAME | | - been | 4 2 NAME | | | | Similar | /Nosition |
| STREET ADDRESS | | | 4 3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY - S | | | | | |
| TITLE | | DELETE | 5.1 1/1LF | | | | Change | Addition |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY - 5 | S1 - ZIP | | | | |

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

6.3 STREET ADDRESS

61 TITLE

6.2 NAME

TITLE

NAME

STREET ADDRESS

DELETE

Change

Addition

FILED

May 07 1997 8:00am

Secretary of State