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

**PROFIT** CORPORATION **ANNUAL REPORT** 



## Sandra B. Mortham

Secretary of State DIVISION OF CORPÓRATIONS

1	e of Businoss TENAY PKWY	Mailing Address 4725 N. COURTENAY PK MERRITT (SLAND FL 329) US		2. Data programme Considered.   20. Data of Leat Description	
				3. Date Incorporated or Qualified 3 11/27/1995	Date of Last Report     06/07/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-3363351	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	е	City & State	_,	6. Election Campaign Financing	Fee Required \$5.00 May Be
Zip	Country	<b>26</b>	Country	Trust Fund Contribution	
24	• 25 9. Name and Address of Current	29	30]	This corporation has liability for intant florida Statutes     Name and Address of New Registration	s 🔲 No
WILL	AM J. STRAND	r riogistorou Agont	81 Name	to. Hame and Address of the hogist	sieu Again
4725 N. COURTENAY PKWY MERRITT ISLAND FL 32953			82 Street Add	ress (F.O. Box Number is Not Acceptable)	
			83		
			84 City		FL 85 Zip Code
SIGNATURE	Signature, typed or pratied ranke of registered ago OFFICERS AND	of and file if applicable (NO DIRECTORS	16 Begissered Agont signature requi	tion's board of directors. I hereby accept the red when reinslang)  ADDITIONS/CHANGES TO OFFICERS	ATE S AND DIRECTORS IN 12
TITLE NAME	D Evans, John H	DELETE	1.1 11116		Change Addition
STREET ADDRESS CITY-ST-ZIP	1702 S. WASHINGTON AVENU TITUSVILLE FL 32780	E	1.2 NAME 1.3 STREET ADDRESS 1.4 C-TY - S1 - ZIP		
TITLE	PVTS	☐ DELETE	११ गम		Change Addition
NAME Street address	STRAND, WILLIAM J. 4725 N. COURTENAY PKWY		\$2 NAME \$3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		⊉ 4 CHY-S1-ZIF		
TATLE		☐ DELETE	\$.1 TILE		Change Addition
NAME			8.2 NAME		
STREET ADDRESS CITY-ST-ZIP			8.3 STREET ADDRESS  8.4. CHY-ST-Z-P		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			N. 2 NAME		
STREET ADDRESS			N.3 STREET ADDRESS		
CITY-ST-ZIP			9.4 C(1) Y · S1 - Z4P		
TITLE		☐ DELFTE	B 1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		
STREET ADDRESS			5 3 STRIET ADDRESS		
CITY-ST-ZIP		DELETE		4	Change Addition
NAME		E. J. OFFICE	I6.2 NAME		C change C required
STREET ADDRESS			IG.3 STREET ADDRESS		
CITY-ST-ZIP			. 16.4 CITY - ST - 7th		
	<del></del>				

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 logal effect as if made under eath; 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 chapted or on an attachment with an address.

SIGNATURE:

**FILED** 

May 15 1997 8:00am

Secretary of State