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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 14 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P95000090672	(3)
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Principal Plac		Mailing Address  1400 COLOMAL BLVD. ST. ROYAL PALM SQUARE FT. MYERS FL 33907-1055				
				<ol> <li>Date Incorporated or Qualified 11/27/1995</li> </ol>	3a. Date of Last Repor 01/23/1996	t
2. Principal P	Place of Business	2a. Mailing Address		4. FE! Number APPLIED FOR 65-0	634848 Applied	
Suite, Apl.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	S8.75 Addit	
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May	Be
<b>3</b>	Country		Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fe	
4	25	29	30	Florida Statutes	Yes 🗌 No	
EOD	9. Name and Address of Cur RRESTER, JAMES H	rrent Registered Agent	81 Name	10. Name and Address of New R	legistered Agent	
	O COLONIAL BLVD. STE. 2024	1	82 Street Addr	ress (P.O. Box Number is Not Accepta	abla)	<del></del>
	/AL PALM SQUARE			ress (1.0. box Number is Not Accepte		
FT.	MYERS FL 33907		83			
			84 City		FL 85 Zip Code	)
office or r	remietered amont or both in the St	ubuz anu 607. Ibuo, Florida Statut tato of Florida, Such change was .	tes, the above-named corp authorized by the corporal	poration submits this statement for the tion's heard of directors. I bereby accurate	purpose of changing its reg	gistered
ageni i a SIGNATURE	am familiar with, and accept the ex	ongations of, Section 607.0505, Fl	Orida Statutes.  E. Fagistered Agent signature requi		DATE	<del></del>
agent La	am familiar with, and accept the ex	oligations of, Section 607.0505, Fi	orida Statutes.		DATE FICERS AND DIRECTORS IN	12
agent ta SIGNATURE 12.	Street or Special Prince of the of OFFICERS  DPST FORRESTER, JAMES H	ingent and telled applicable (NO* AND DIRECTORS	OFICE Statutes.  E. Firgistered Agent signature requi	red when renstating)	DATE FICERS AND DIRECTORS IN	12
agent Ta SIGNATURE 12. TITLE NAME STREET ADORESS	OFFICERS  DPST FORRESTER, JAMES H 6687 KESTREL CIRCLE	ingent and telled applicable (NO* AND DIRECTORS	E Frigistered Agent signature required.  13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS	red when renstating)	DATE FICERS AND DIRECTORS IN	12
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