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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mörtham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600001989 (8)

Principal Place 100 CORPORAL VENICE FL 342	TION WAY	Mailing Address 100 CORPORATION WAY VENICE FL 34292-3523			
				 Date Incorporated or Qualified 01/02/1996 	3a. Date of Last Report
2. Principal f	lace of Business	2a. Malling Address		4. FEI Number	Applied For
21		26		65-0642882	Not Applicable
Suite, Apt. #, etc.		Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State	***************************************	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Curre		30	Florida Statutes 10. Name and Address of New R	Yes No
DIOI		ont riogisterou Agont	81 Name	(b), reality and reactions of feet re	shiereten viñour
BIGNESS, GORDON 100 CORPORATION WAY			70 0	Addison (D.O. Davidson beats)	LIEV
	ICE FL 34292		82 Street	Address (P.O. Box Number is Not Accepta	.016)
			83		
	•		84 City		85 Zip Code
					FL 88 Zip code
11. Pursuant office or i	to the provisions of Sections 607.05 registered agent, or both, in the Sta	te of Florida. Such change was a	is, the above-named uthorized by the corp	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered
agent La	am familiar with, and accept the obli	gations of, Section 607,0505, Fig	rida Statutes.		
SIGNATURE	Signor viol typed or pointed name of registared a	igent and tille if applicable. (NOTE	Registered Agent signature	required when reinstating)	DAŤĚ
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	BIGNESS, GORDON		1.2 NAME		Į
STREET ADDRESS	501 N ALBEE RD		1.3 STREET ADDRESS		
CITY-SI-ZIF	NOKOMIS FL 34275	□ per Pre	1.4 City-ST-ZIP		Character Character
TITLE	D DIONEGO DALH	☐ DELETE	2.1 TITLE		Change Addition
NAME.	BIGNESS, PAUL 100 CREST VIEW DR		2.2 NAME		
STREET ADDRESS	ENGLEWOOD FL 34223		2.3 STREET ADDRESS 2 4 CITY - SY - ZIP		:
City-St-Zi ^o	CHOPPHOOD IF 04550	DELETE	3 1 TITLE		Change Addition
NAME		<u>, </u>	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		}
City-St-ZiP			3.4. CITY-ST-ZIP		
TIPLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADOPESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZIP		
TIFLE		☐ DELETE	51 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5.4 CITY+ST-ZIP		
TULLE		DELETE	6.1 TIFLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHTY - ST - ZIF	<u> </u>		6.4 CITY+ST-ZIP		

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 obtained, or on an artishment with an address.

FILED

May 23 1997 8:00am

Secretary of State