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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000019022 (8)

## FILED May 14 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  980 \$6MINOLE BLYD  \$6MINOLE FL 34842  \$6MINOLE FL 33772-2525					
			3. Date Incorporated or Qualified 02/28/1996	3a. Date of La	st Report
2. Principal Place of Business	26. Mailing Address 26		4. FEI Number 22/8742		Applied For Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc	).	39-300713	5 \$8.7	75 Additional
2	27	<u> </u>	5. Certificate of Status Desired		e Required
City & State	City & State		6. Election Campaign Financing	,	<b>00</b> May Be
23 Zip Cour		Country	Trust Fund Contribution		ded to Fees
24 25	29	30	8. This corporation has liability for i	intangible tax und ] Yes 🏻 No	er 8: 199:032 <sub>1</sub>
	Ireas of Current Registered Agent		10. Name and Address of New Re		
FINNEGAN, DONALD		81 Name			
1962 LORRAINE RD		82 Street Ad	Idress (P.O. Box Number is Not Acceptab	ole)	
LARGO FL 34644					
		83			
		84 City		<b>—</b> 85	Zip Code
44 Physical to the manifeless of Co		21-1 4-2 (% along a second as	the state of the s	FL  °°	
		DE Clarida Statulas	•		
SIGNATURE Signature, typed or plinted n.	ame of registered agent and title if applicable.	(NOTE: Registered Agen; signature rei		DATE	
SIGNATURE Signature, typed or printed in	ane of registered agent and title if applicable. OFFICERS AND DIRL CLORS	(NOTE: Registered Agent signature for		DATE CERS AND DIREC	TORS IN 12
SIGNATURE Signature, typed or printed in TIPLE D	ane of registered ages and title if applicable.  OFFICERS AND DIRECTORS  DELFI	(NOTE: Registered Agent signature red	quired when reinstaling)	DATE	TORS IN 12
SIGNATURE SIGNATURE SIGNATURE  12. TITLE NAME STREET ADDRESS 22365 CROOM RO	ane of registered agree and title if applicable.  OFFICERS AND DIRECTORS  DEETI  YN  D	(NOTE Registered Agent signature red  13. E 1.1 THEF	quired when reinstaling)	DATE CERS AND DIREC	TORS IN 12
SIGNATURE SIGNATURE SIGNATURE, typed or printed in  12. TITLE NAME FINNEGAN, EVEL 22365 CROOM RI 22365 CROOM RI	ane of registered agree and title if applicable.  OFFICERS AND DIRECTORS  DEETI  YN  D	(NOTE Registered Agent signature ref 13. E 1.1 THE 1.2 NAME	quired when reinstaling)	DATE CERS AND DIREC	TORS IN 12
SIGNATURE SIGNATURE SIGNATURE SIGNATURE. Typed or printed in the street address City-st-zip BROOKSVILLE FL	ane of registered agrees and title if applicables.  OFFICERS AND DIRECTORS  DELETI  YN  D  . 34601	(NOTE: Registered Agent signature ref 13.  E 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	quired when reinstaling)	DATE CERS AND DIREC	TORS IN 12 nge
SIGNATURE SIGNAT	ane of registered agrees and title if applicables.  OFFICERS AND DIRECTORS  DELETI  YN  D  34601	(NOTE: Registered Agent signaturo rot  13.  E 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	quired when reinstaling)	DATE  DERS AND DIRECT  Cha	TORS IN 12 nge
SIGNATURE  Signature, typed or printed in  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  PINNEGAN, JACK  STREET ADDRESS  22365 CROOM RI  BROOKSVILLE FL  TITLE  D  FINNEGAN, JACK  22365 CROOM RI  22365 CROOM RI  CONTROL  STREET ADDRESS  PINNEGAN, JACK  22365 CROOM RI  CONTROL  STREET ADDRESS  CONTROL  STREET ADDRESS	ame of registered agent and title if applicable.  OFFICERS AND DIRECTORS  DELETI YN D . 34801	(NOTE: Registered Agen; signature rec  13.  E 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE	quired when reinstaling)	DATE  DERS AND DIRECT  Cha	TORS IN 12 nge  Additio
SIGNATURE  Signature, typed or printed in 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  FINNEGAN, EVEL'  BROOKSVILLE FL  D  FINNEGAN, JACK  2365 CROOM RI  BROOKSVILLE FL  BROOKSVILLE FL  BROOKSVILLE FL	ane of registrice agent and title if applicable.  OFFICERS AND DIRECTORS  DELETI YN 0 34601  DELETI 0 34601	(NOTE: Registered Agen; signaturo rot  13.  E 1.1 TITLE 1.2 HAME 1.3 STREET ADDRESS 1.4 CHY-ST-ZIP E 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP	quired when reinstaling)	DATE  DERS AND DIRECT  Cha	TORS IN 12 nge Additio
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I do needy certify that the information supplied by this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. Floring registry that the information indicated on this annual report or oppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the cyling attout of 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 1995, or on an attachment with an address.

Donald Finnegan, Presiden

813-319-0909