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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600020444 (1)

IOHN PAGE ENTERPRISES INC.

00111	TAGE ENTERN HOLO, NO				
Principal Place of Business Mailing Address 516 BURNS LANE 516 BURNS LANE SARASOTA FL 34236 SARASOTA FL 34236-70					S JODNICOS HIE IBNIC DINI CONH OCH COND BOND STAN BOND CICH GIBN CICH 1985
					3. Date Incorporated or Qualified 3a. Date of Last Report 03/05/1996
2. Princi 21	pal Place of Business	2a. Mailing Addre	ss		4. FEI Number Applied For Not Applied ble
Suite, Apt #, etc.		Suite, Apt. #, 6	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State 23		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
7 _{(P}	Country 25	Zip 29	3	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
	9. Name and Address of Cur				10. Name and Address of New Registered Agent
	PAGE, JOHN L			81 Name	
!	516 BURNS LANE SARASOTA FL 34236			82 Street	Address (P.O. Box Number is Not Acceptable)
	ON PROOFN I & OTAGO			83	
				84 City	FL 85 Zip Code
offic ager SIGNATI	e or registered agent, or both, in the S nt. I am familiar with, and accept the ol	tate of Florida. Such chang bligations of, Section 607.0	e was aut 505, Florid	horized by the corp da Statutes.	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
12.	OFFICERS	AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLF	D	□, DEL	ETE	1.1 TITLE	Change Addition
NAM:	PAGE, JOHN L			1.2 NAME	
STREET ADD	CARACOTA EL GACCO			1.3 STREET ADDRESS	
CITY-S1-ZI TITLE	D	DEL	ETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME	PAGE, KATHARINE S			2.2 NAME	
STREET ADD				2.3 STREET ADDRESS	
CITY-SI-ZI	SARASOTA FL 34236			2. 4 CITY - ST - ZIP	
TITLE		∭ DEL	ŁIŁ	3.1 TITLE	Change Addition
NAME STREET ADD	MALCC			3.2 NAME 3.3 STREET ADDRESS	
City St-7i	}			34. CITY-ST-ZIP	
1/1/6		☐ DEL	ETE	4.1 TITLE	Change Addition
NAME				4. 2 NAME	
STREET ADD	RESS			4.3 STREET ADDRESS	
C(1) - S1 - Z(P	L DEL	FTF	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
TETLE NAME		لي الاد	.10	5.7 THEE 5.2 NAME	1 Classific Classific
SIREELADO	MESS			5.3 STREET ADDRESS	
DITY-ST-Z	ĺ			5.4 CITY - ST - ZIP	
TITLE		DEL.	ETE	6.1 TITLE	☐ Change ☐ Addition
NAME		•		62 NAME	
STREET ADD	}			63 STREET ADDRESS	
CHY-\$1-20		nlied with this films does n	nt qualify	6.4 CITY-ST-ZIP	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the
infor Lam	mation indicated on this annual report	or supplemental annual re in or the receiver or trustee	port is true empower ar addre	e and accurate and ed to execute this i	I that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

FILED

Apr 07 1997 8:00am

Secretary of State