## 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 # P96000025083 (2)

NATIONAL LAW SEARCH, INC.

Principal Place of Business 1857 WELLS RD ORANGE PARK FL 32073		Mailing Address 1857 WELLS RD ORANGE PARK FL 32073-2338			t 1931) Mai 119 (Bull Bull Bull Bull Bull Bull Mai 1941) 46(8) 15(82 HH 1861	
					3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1996	
2. Principal Pa	acc of Business	2a. Ma ling Address			4. FEI Number Applied For	
21		26			59 - 336 6 8 2 2 Not Applicate	
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	
Ch. S Ch. to		City & State			Fee Required	
City & State  23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
Zip	Country	7ip	Countr	γ	8. This corporation has liability for intangible tax under s. 199.032.	
24	25 29		30		Florida Statutes Yes Ano	
	g. Name and Address of Curr		1		10. Name and Address of New Registered Agent	
NICK	Kerson, Guy D		8	l Nam	ne	
1857	' WELLS RD		82 Street Addre		eet Address (P.O. Box Number is Not Acceptable)	
ORA	NGE PARK FL 32073					
			8:	3		
			84	4 City	/ 85 Zip Code	
					FL   60 20 20 20 20 20 20 20 20 20 20 20 20 20	
office or re agent. Lar SIGNATURE	eg stered agent, or both, in the Sta in fame ar with, and accept the obl	ite of Florida. Such change was a igations of, Section 607.0505, Flo	authorized b orida Statute	by the co es.	corporation's board of directors. I hereby accept the appointment as registered	
Olea Parteria.	Styrial entity is 1 or pointed marile of region real		E. Fingistered A	gent signati	alure required when reinstating) DATE	
12.	OFFICERS A	IND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TOLE		DELETE	1.1 TITLE	_	PRESIDENT Change Additi	
NAME			1.2 NAME		SS 668 RIDGESTONE CT.	
\$TREET ADDRESS				et address	SS 668 K INDESTRACE CT.	
(31Y - \$1 - 71P				ST - ZiP	ORANGE PACK, FL 33065	
NITLE NAME			2.1 TITLE 2.2 NAME	•	JOANNE W. NICKERSON	
STREET ADORESS				: Et address		
1			1		DRANGE PARK FL 32065	
CDY+S1 ZIF TOTCE		DELETE	2 4 City-\$1-ZiP 3 1 Title		Change Additi	
NAME			3 2 NAME			
STREET ADDRESS				Et address	22	
CITY-ST-ZIP			3.4. CITY			
TITLE		DELETE	4 1 TITLE		Change Additi	
NAMÉ			4 2 NAM	E		
STREET ADDRESS			4.3 STREE	ET AODRESS	SS	
CHY-SI-ZIF			4.4 CiTY-	S1-ZIP		
TITLE	14	DELETE	5.1 TITLE		Change Additi	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	ET ADDRESS	ss	
CITY-ST-7IF		**************************************	5.4 CITY	S1-ZIP		
1:1LF	☐ DELETE 611		61 TITLE		☐ Change ☐ Additi	
NAME			6.2 NAME			
STHEET ADDRESS			6.3 STRE	ET AODRES:	SS	
CITY-S1-7/2			6.4 CITY			
informatio Lam an of	in indicated on this annual report of	r supplemental annual report is to or the receiver or trustee empoy	rue and acc ered to exe	curate ar ecute this	on stated in Section 119.07(3)(i). Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under oath; this report as required by Chapter 607, Florida Statutes; and that my name	

SIGNATURE: GUY D. NICKERSON

**FILED** 

Jan 21 1997 8:00am

Secretary of State